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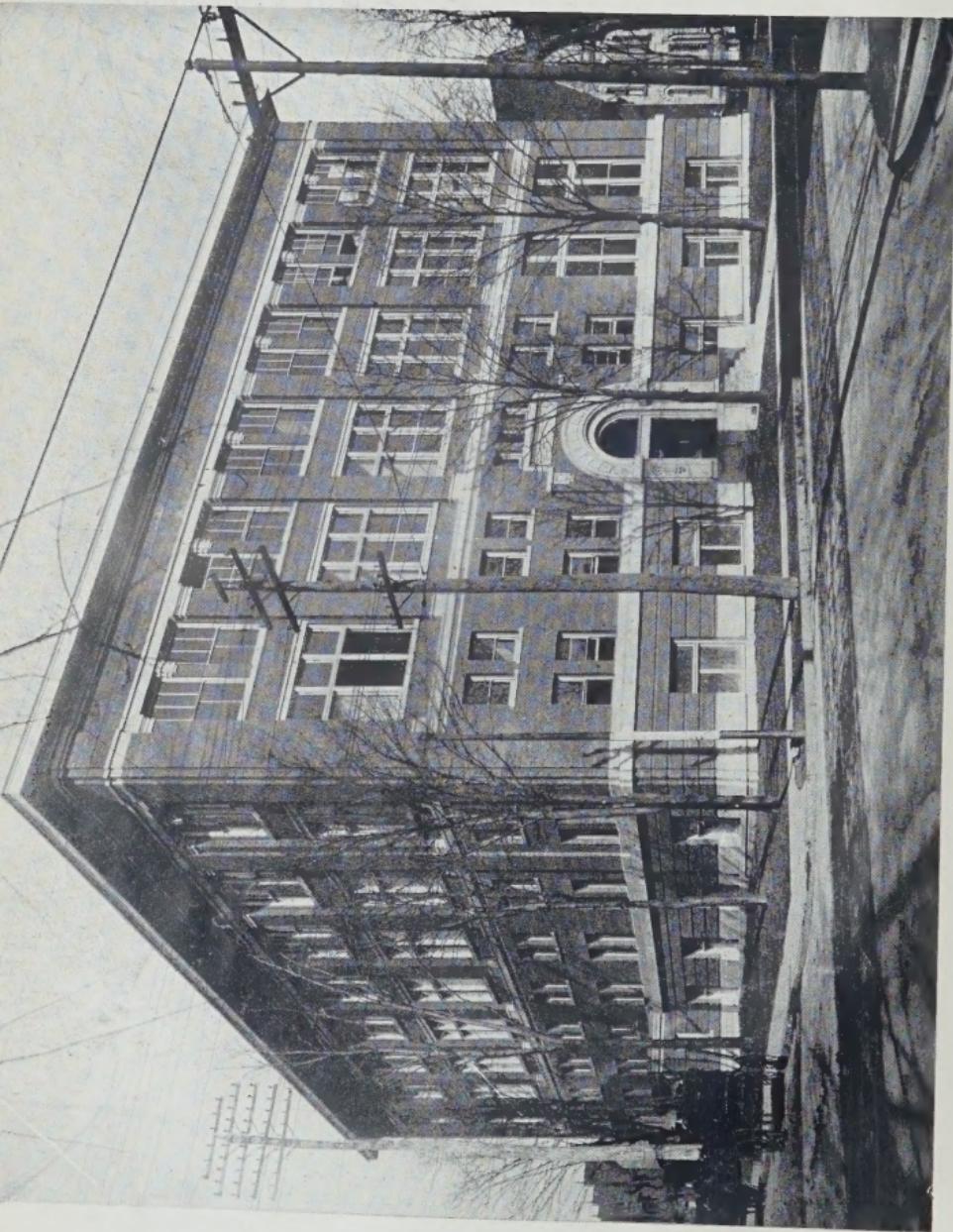


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THE HYA YAKA

VOL. XVI.

TORONTO, OCTOBER, 1916

No. 1

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Some Phases of Periodontal Septic Infection

A. J. McDONAGH, L.D.S., D.D.S.

NOT very long ago—just a few years since—dentists found it almost impossible to convince the public, or in fact the medical profession, that dentistry or oral conditions had anything to do with the health. Fortunately there were a few exceptions scattered throughout the country. In the old country, as our friend, Dr Thornton, would say: “they saw the vision” much earlier than it was seen here, and oral sepsis became a live subject in medical and dental circles, and to-day has lost none of its interest. The dentists of England, and particularly of London, deserve the gratitude and approbation of the world for their part in promulgating the knowledge and doctrine necessary for furthering this teaching. As was to be expected when the medical profession realized the benefits of eliminating oral foci in certain cases, they very soon went to extremes, and we are having in this country to-day a little of that same experience, the pendulum is swinging too far—steady it. We are going to deal in this paper very briefly, it is true, with one phase of oral sepsis, namely, dental periclasia, commonly called maxillary pyorrhea alveolaris, and we will deal principally, though not entirely with the suppurative variety. To what extent is periclasia responsible for general septic infection?

In your practice you will have physicians sending patients to you asking you to extract all of their teeth because they have the condition which their physician calls pyorrhea. Every dentist has had this occur more than once, and will undoubtedly again. Pyorrhea alveolaris, or rather periclasia, is blamed for a great deal that it is not responsible for, and it is our business, yours and mine, to say where and when periclasia may or may not be the cause of constitutional complications. If you go into a factory or any gathering of working people, the majority of them have unhealthy gums, red, often swollen, the teeth dirty and covered with deposits, and yet if their teeth are not decayed those people are, as a rule, healthy. If disease is always concurrent with deposits on the teeth, how are these people alive? Any man who has lived in a farming district knows that thousands of farmers never buy a tooth brush,

much less use it, nevertheless farmers are not such an unhealthy lot; when their teeth decay they have them extracted, so that often when they get to middle age they have not enough teeth left for proper mastication, then, of course, we have far reaching consequences, but while the disease is progressing they are not in the debilitated condition you would think they should be. But, gentlemen, notwithstanding the fact that we believe the foregoing to be true and observe it every day of our lives, we must not forget that there are forms and periods of gum infection, forms and periods of dental periclasia which cause serious bodily harm, cause cripples and even death. Therefore, the study of this subject becomes exceedingly interesting.

I have noticed in my practice that there are two stages of the disease in which one is apt to get a general infection as the result—the first stage in the initial stage or the beginning, that is at the time when the gum becomes affected at the gingival margin and we have a simple gingivitis. The mucous membrane of the mouth is a protection against the invasion of micro-organisms and the gingival trough is lined with mucous membrane, but if that lining be broken by chemicals, traumatism or otherwise, you immediately establish a method of ingress for septic material. When we were in Minneapolis at the Dental Teachers convention last January, Dr. Hartzell exhibited a slide made from a case of gingivitis, which clearly demonstrated the fact that in that case the blood vessels were open and exposed to all the material found in the gingival trough. Seeing a slide like that and not having examined a slide made from the disease as it progressed, might readily lead us astray and give rise to the erroneous statements which we sometimes are tempted to make, asserting that in an extensive case of suppurative periclasia we have an absorbing surface of six, eight, and as high as twelve square inches in the mouth. Why, gentlemen, if those individuals spoken of earlier, had that amount of absorbing surface anywhere in the body they would necessarily bear a charmed life. What happens? Suppose the skin were broken in any other part of the body what would happen? Immediately the epithelial tissue would make an endeavour to cover the break. Mucous membrane is composed of epithelial cells; why not suppose that they would do the same thing and that you would have the mucous membrane following the pocket down and leaving only a small portion of it unprotected and into that portion nature pours her protecting leucocytes, so that after the initial

stage of gingivitis nature's efforts to form cicatricial tissue, the extension of the mucous membrane and the protecting cells of the blood take care to a very great extent of the otherwise very serious oral lesions. The more slowly the disease progresses the more nearly complete the protection. But unfortunately in some cases the process is rapid and the protecting wall does not extend to the bottom of the pockets; as a consequence when you explore you will find the bone unprotected and a perfect absorbing surface, this, of course, will only happen on a few teeth at a time, generally on two or three. When this condition arises you are almost sure to get a general septic infection. I have never to my knowledge seen a case of this kind where the patient remained in good health if the conditions were allowed to remain for a prolonged time. Therefore, there are two stages, the initial and the advanced stages, in which under certain circumstances, we are very apt to have general septic infection as the result of suppurative periclasia. There is also another fact that we must not lose sight of, namely, that as pus pockets in the mouth are not the normal condition, so there may be and almost certainly there are pathogenic germs propagated there, which by their pathogenicity are likely to have a deleterious effect in the intestinal canal and the deeper the pocket the greater the number and the more virulent the germs are likely to be. As regards cases proving the connection between periclasia and general debility, I will just speak of four. About four years ago a man came to me sent by a physician in Toronto. His own physician had told him he would have to give up business for a year and he might never be able to go back to business again. I treated his gums, beginning in this case by getting rid of all the germs possible by flushing the pockets and flooding with an antiseptic; in a few days he was a great deal better; inside of two months—having had every tooth treated—he was quite well, and is now a very prosperous, healthy individual.

A young lady presented herself complaining that she was afflicted with rheumatism, not knowing whether the mouth infection was the cause of the trouble or not. I was careful not to promise much. I treated her teeth and she immediately got rid of the rheumatism; this occurred three years ago, she was in my office about three weeks ago, her rheumatism was coming back, we made X-rays of her teeth and found one molar septic, I had that tooth extracted and she reports she has no more rheumatism. This was a case where there were two sources of trouble producing the same effect.

VACCINE TREATMENT.—A short time ago we were injecting vaccine, as an adjunct in the treatment of periclasia, but there was always the question as to whether we had the proper organism or not. In speaking to Dr. Hartzell about the subject, he said: "Why not use vaccines manufactured by nature?" I believe we all do most of the time, though we do not go at it designedly, as he has done. Here is a case to illustrate: A physician came to me suffering from rheumatism, he walked with two crutches, he had quite an extensive case of suppurative periclasia which he wanted me to treat, and I treated it in such a way that I caused in a circumscribed area more absorption than he was already getting, when I got through a pocket it was clean and healthy and it healed. In two weeks he was walking with but one cane and he showed me he could walk across the floor without a cane. He then had his tonsils removed, but as he was well on his way to recovery, they were removed as a matter of precaution. I saw him on Friday last, and he asked me to go and play a game of golf with him, so he is apparently all right. There is just one more case which I am going to report, it is a case of neglected salivary calculus. Ordinarily salivary calculus has no deleterious effect on an individual further than the loss of his teeth. This we would expect if Dr. Black's theory has any foundation in fact, and his experiments go to show that it has. A physician was called in to see a patient who had a persistent hacking cough, which, accompanied by a general breaking up, had put the patient in a weakened condition. After treating him for a short time without any result, the physician sent him to me. This man had about the dirtiest mouth you could see, salivary calculis of a comparatively soft variety, piled up on most of his teeth, and in that calculus filth. I removed the calculus and gave him instructions, which, by the way, I saw were carried out, and immediately he started to get better, the cough left him, and I have not heard of him since, all going to prove that there are certain cases responsible for constitutional complications, and certain cases which are not.

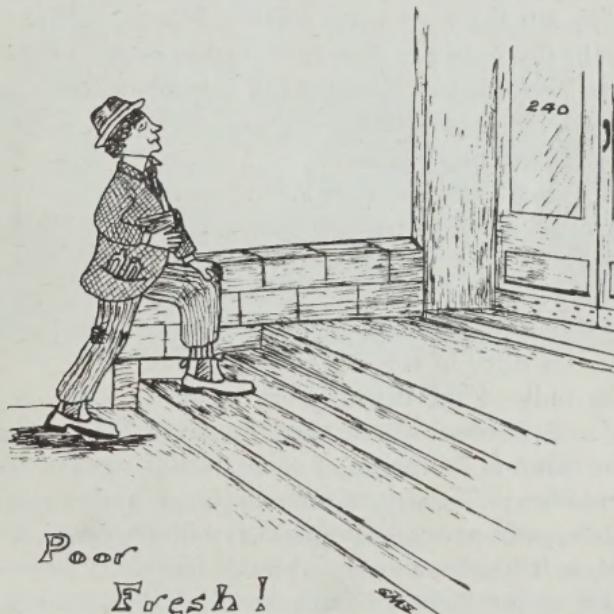
Goadby, in London, reported having cultured a streptobacillus from an oral pus pocket, which, when injected into animals, caused arthritis. Drs. Price, Hartzell, and their co-workers, are carrying on similar experiments with streptococci, and so the march goes on.

One of the best contributions on this subject which I have seen is by Dr. Logan, in "Items of Interest," December, 1915, entitled "Blood Findings in 162 Cases of Chronic Oral Infection Associated

With the Teeth." In this paper, Dr. Logan demonstrated that we do not get leucocytosis as a rule from suppurative periclasia, and that often we have less white blood cells in the circulation than the average, and draws attention to the very great danger from periapical abscesses in comparison. Dr. Logan's investigations correspond with my experience, and help to corroborate statements made earlier in this paper, namely, that it is my experience in treating several thousands of patients suffering from dental periclasia, so-called pyorrhea that there is not the enormous amount of absorbing surface which we might expect to find from a superficial examination in these cases—but my experience also tells me that this disease is a serious factor in the pathology of the nation, and it is not only our privilege, but our most sacred duty to use our best efforts to combat the evils of it with a view to eliminating it and its results, even at a sacrifice to ourselves. The question now arises as to the best method to treat this malady. In my experience there is only one way—remove all dead and foreign material, make as near as you can a surgically clean wound, and depend on nature to do the healing. To remove all dead and foreign material is sometimes very difficult, and a clinic is the only method by which we can adequately describe and demonstrate the procedure. The difficulty generally arises from the inaccessibility of parts of the pus pockets and the sensitiveness of the inflamed tissues. The inaccessibility is partly overcome by the shape of our instruments and our knowledge of the best way to use them. In my practice I have a set of instruments called the McDonagh periodontic instruments for my own use, but many operators might find it difficult to use them. Some would prefer the two point contact planing instrument, such as Hartzell's, Carr's, James's, etc.; others might like Logan Buckley sets, and so on. The whole secret is not so much in the instruments as the ability to use an instrument, and the knowledge of what you want to do.

But one should have one full set of instruments of some man's design, who has been successful in treating the disease with that design. And one who has been successful has taken care not to scratch the root surfaces deeply so that he leaves an ugly, deep groove, but rather to leave the surfaces fairly, if not entirely, smooth and free from micro-organisms or shelters for organisms. When this is done, in the great majority of cases, we need absolutely no drugs or medicines, and when this is not done, drugs or medicines will give only temporary relief.

In chronic cases, when we find the root surface considerably softened, it is necessary to take a great amount of care in instrumentation, and often to use nitrate of silver. In patients who are afflicted with diabetes, in young children, in the very old, and in many other special cases, we have to deviate a little in our treatment but this treatment cannot treat of those special cases, and I doubt if you would get enough out of it to repay you even if we had time, because cases which require different treatment to that which I have outlined are rare. Thank you, gentlemen, for your kind attention.—*Dominion Dental Journal.*



Canadian Army Dental Corps

WALLACE SECCOMBE, D.D.S., TORONTO

THE personnel of the Canadian Army Dental Corps in Military District No. 2 is composed of seventy members, distributed approximately as follows:

Convalescent Home for Returned Soldiers at Toronto.....	3
Niagara Camp.....	12
Camp Borden.....	55
Total.....	70

The records show that, from this district alone, over 10,000 soldiers have been "made fit" by the Dental Corps—men who were either rejected or who would have otherwise been rejected, because of the condition of their teeth. The invaluable service rendered by the Corps in this district is further shown by the record of operations performed. The figures for the months of June, July and August, 1916, are as follows:

Number of patients treated.....	9,500
Number of dentures inserted.....	1,500
Total operations performed.....	53,778

This work was accomplished by twenty-five operators. While there is a total of seventy C.A.D.C. officers and men in the district, only twenty-five are actually engaged at the dental chair, the balance being on duty in the laboratory, mess, etc.

The great bulk of the dental work of the district is accomplished at Camp Borden, where there are over 26,000 men under canvas. The camp is composed of some 28,000 acres of land, and its cement roadways, electric lights, drainage and water supply give it all the appearances of a permanent military camp, though as a matter of fact it has been occupied but a few short months. The camp quarters of the Dental Corps are admirably located upon a high piece of ground amidst clumps of pine and silver poplar. The building is a plastered structure twenty-five feet by one hundred and fifty-two feet. The floor is of cement, covered with grey enamel, while the walls and ceiling are finished in white. The only exception is the laboratory, where the walls and ceiling are tinted with a soft green shade of stain.

The laboratory occupies one end of the building and contains bench room for sixteen men, who may be seen working like beavers any day from 8 to 12 and from 1.30 to 5 o'clock. A large plaster bench is located in the centre of the room, and the orderliness and cleanliness prevailing is an example to many private dental laboratories. Electric lathes have been installed, and the standard of workmanship is of a high order.

The other end of the building is occupied by the department of stores, presided over by Quartermaster Lieutenant J. D. Webb. Here may be found a complete assortment of all the dental instruments and materials required. These are kept in such perfect order that the average civilian dentist who visits the C.A.D.C. at Camp Borden immediately resolves that his own stock cup-



C.A.D.C. Building—Camp Borden.

board will henceforth be properly stocked and kept in better order. A number of S.S.W. portable dental chairs are also stocked, that the Corps may be ready to meet any possible emergency.

In the centre of the building is the large operating room with twenty-four operating chairs, a private operating room, office, and patients reception room. The reception room is built to accommodate about twelve or fifteen patients, but so great is the demand in the camp for dental services that this room is constantly crowded with from forty to fifty men, with an additional score or two usually waiting outside. It is not necessary to urge the soldiers to visit the C.A.D.C. surgery. Upon the other hand, every possible argument and device is used by the men in presenting their claims to be next in line for treatment.

Hot and cold water, large sterilizer, electric dental engines, fountain cuspidors and twenty-four dental chairs tell the story of the main dental surgery. In addition to this equipment, fly screens and awnings upon the windows indicate how the militia authorities regard the work of the Dental Corps. The C.A.D.C. in this district has been accorded every possible courtesy and assistance by Major-General Logie and Col. Mewburn. These officers have realized the value and absolute necessity of dental service in the army, and have always acquiesced in every reasonable request of the Corps, thus enabling the dentists to work under the best possible conditions.



Entrance to Major Thompson's Tent—Camp Borden.

In certain camps the work of the Dental Corps has to be carried on in spite of the red tape that some officers delight to unwind, but in Military District No. 2 it may be said, to the great credit of those in charge, that the Dental Corps has received nothing but help and encouragement in everything it has undertaken.

The tents within the C.A.D.C. lines are, the large tent where the Corps conducts a canteen, two large mess tents, the cook-house and refrigerator, a group of eighteen tents comprising officers' quarters, and a group of sixteen tents for N.C.O.'s and men.

The impression gathered by a visit to Camp Borden is that the C.A.D.C. is an integral part of the Militia and not a fifth

wheel to the cart. The writer was privileged to visit the camp not long since, in company with a party of about twenty dentists, and the first sight to greet us at the station was a motor truck labelled "C.A.D.C." That in itself seemed to suggest that the Dental Corps had been put "on the map," and it was the consensus of opinion that the clean-cut, orderly and precise way in which C.A.D.C. affairs in the camp were conducted, accounted in large measure, for the standing that had been accorded the Corps.

The dental services in this district are a credit to dentistry, and Major Walter Thompson, Officer Commanding, deserves commendation for what is being accomplished, and particularly for the soldierly way in which he has organized and conducted the Corps at Camp Borden. Major Thompson is familiar with military usage, is aggressive and a man of action, and he has made it possible for the C.A.D.C. members to live and work under the most pleasant and comfortable conditions possible. Well done, Major Thompson!

—*Oral Health.*

TOBACCO

Tobacco is a dirty weed—

I like it!

It satisfies no normal need—

I like it!

It makes you thin, it makes you lean,

It takes the hair right off your bean,

It's the worst damn stuff I've ever seen—

I like it!

—*Oral Hygiene.*

Teacher to Lebetter (10 years ago)—In what year did Columbus discover America?

Lebetter '18—I don't know.

Teacher—You don't know. Look it up. See—Columbus 1492—Discovered America.

Lebetter '18—I thought that was his telephone number.

“Vivent les Tommies!”

J. J. BELL

To make you a ver' fine song
I've not ze good English tong,
So please me excuse
When words get confuse—
And you I detain not too long.
I seeng him to Mistaire Jean Bull
And all of Britannia Rule.
To seeng him I moost
To save me from boost
Mon coeur he ees feeling so full.
Mais oui, I'ave been to ze Front;
I make my good bayonet blont;
But bullets come ploomp!
I tocmble down, boomp!—
I t'ink I was going to gront.
Dieu! but ze Tommies can fight!
Zey know not ze meanings of fright.
Une bombe she bang go!—
They chant loud, “Wot oh!”
And proverbs mos' strange zey recite.
Zey shrink not from terreeble skenes,
They laugh at ze deedly machines!
Bravo! Zey make sharge
At Germans more large,
And geeve to zem beaucoup des beans!
And wen zere goes somet'ing all wrong,
Wen ver' special 'ell comes along,
Zey lift opp zeir voice
And make ze glad noise
Of “Are we donarted? . . . Non!”
So “Vivent les bons Tommies!” I say—
“Les Tommies tres braves ettres gais!”
Come, toast zem some beers
And geeve zem trois sheers—
Ze Tommies!—“eep, 'eep, 'ooray!”

Dental Colleges in Foreign Countries

RUSSIAN DENTAL COLLEGES

NINETY per cent of the dentists in Russia are said to be women. The chief school is the dental college at Petrograd which has 600 students, less than 5% of whom are of the sterner sex. Warsaw, Moscow, Odessa, and Kiev, also boast of large dental schools. The course is 3 years, and the fees for tuition amount to approximately \$100 per year. The State diploma costs \$10, and a license to practice is granted only after proof of qualification. The first year is devoted to mechanical dentistry, and the subsequent years to clinical work, from 10 a.m. to 5 p.m. After this follow lectures until 9 p.m. Examinations are held every month. The lectures at Petrograd number about twelve and come from the Imperial University Faculty of Medicine. The ten demonstrators are chiefly women. Fees in both medicine and dentistry are considerably lower than in America and hours of work are longer. Men seem to prefer the medical profession, and it is said that even in Petrograd the men dentists of standing do not number more than half-a-dozen.—*Oral Hygiene*.

JAPANESE DENTAL COLLEGE

Tokyo Dental College, Tokyo, Japan, was founded in 1890 and is entering its twenty-sixth session and numbers 669 graduates who have taken the full three year course. In 1907 a night school was organized for the purpose of giving preliminary instruction to candidates for government examination. The course covers two years and comprises lectures and demonstrations. Up to date the total number of pupils attending this course has been 3347 of whom 237 have graduated and 300 who studied the course have obtained licenses by passing the government examinations. A practical course attached to the night school has graduated 189 persons. A special correspondence course is provided for those unable to attend any course in the College. Five series of systematically compiled dental lectures and various works on dentistry are published by the College as well as a dental journal, now in its twentieth year of publication. The number of persons who have passed the government examination exclusively through study of these lectures number 69.

The teaching staff consists of 22 professors, 3 assistants, 8 lecturers and 14 demonstrators.—*Oral Hygiene*.

THE HYA YAKA

A JOURNAL PUBLISHED MONTHLY DURING THE COLLEGE YEAR
BY THE STUDENTS OF THE ROYAL COLLEGE OF
DENTAL SURGEONS OF ONTARIO

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Representative of Graduates—H. K. BOX, D.D.S.

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TORONTO, OCTOBER, 1916.

No 1.

Editorials

THE COLLEGE AND THE C.A.D.C.

THE college has reason to be proud of the part her men are playing in the war. The work being done by the dental corps in making more men physically fit to be of service to their country—men who before the Corp's introduction into the army would have been dismissed as physically unfit, cannot be too highly commended. Since the last issue of our magazine, fifty three men who, all through the summer months have been preparing themselves to meet the unusual demand for dentists, have graduated and will either take their places as dental surgeons in the army or will carry on the practices of more experienced dentists on active service. Others are now preparing themselves to render similar service. Too much credit and thanks cannot be given the board of directors for their efforts in making the special C.A.D.C. preparatory course not only a possibility, but in bringing it to so successful a conclusion.

THE J. B. WILLMOTT MEMORIAL SCHOLARSHIP

In recognition of the persistent efforts of our late Dean Willmott in raising the status of the dental profession to its proper sphere, the board of the R.C.D.S. have established the J. B.

Willmott memorial scholarship; and in doing so have created a new and still higher standard for the future Canadian graduate. Needless to say the scholarship will prove to be a coveted prize as it takes the form a years tuition in the senior year free to the student who makes the highest average standing in all departments of the Junior Year. The wisdom of this arrangement is quite apparent, as the student wishing to capture this honour must begin in his freshman year to win it. The honour once gained, will be upheld not only during his Senior Year but throughout his professional career. Those who are not so fortunate as to gain the prize but who have worked diligently for it, have acquired a habit of diligence and perseverance which will prove a great asset to them in the practice of their chosen profession.

No more glowing tribute could be paid to the work of the founder of the R.C.D.S. than to have his name inscribed upon its scholarship and no greater incentive to higher ideals could be given a young graduate than a reward bearing the name of the true father of dentistry in America—a name which has stood for so much in the eyes of his colleagues.

SPECIAL ANNOUNCEMENT

We sincerely urge every student to lay to heart the appeal of the business manager to patronize our advertisers. They expect tangible results from their advertisements and to meet our financial obligations in the publishing of our magazine we need the income derived from this source. Do not merely patronize them but tell them that you are a dental student and noticed their ad in HYA YAKA. If each student adheres to this policy, the financial success of our magazine this year is assured!

Here's to Man; he's like a kerosene lamp; he is not over bright; he is often turned down; he frequently smokes and generally goes out at night.

THE HARD TASK

You can do it, so can I,
If we've got the grit to try,
Set your thoughts on things worth while,
Hump and hustle, wear a smile.

Note and Comment

The new infirmary coats are proving a greater success than at first anticipated. Especially is their utility manifested as a protection to the students clothing during extraction.

The plan of having a crown and bridgework demonstrator on the infirmary floor both morning and afternoon each day is much appreciated by the senior students.

The Seniors have been making a grand endeavour of late to regain their lost dignity.

Beginning with next month HYA YAKA intends publishing in detail the work attempted in Clinical oral surgery in the infirmary. Each case will be illustrated with all available photographs, skiagraphs, etc., and will be invaluable to both student and graduate.

The installation of the electric lathes in the senior laboratory is a step in the right direction. We are assured that electric engines in the infirmary is next in order.

The junior class is the smallest in the history of the college but their work is of the very highest order.

TWO PROFESSIONS

Fisk '18—

“You ne'er can object to my arm round your waist
And the reason you'll readily guess,
I'm an editor, dear, and I always insist
On the 'Liberty of the Press.'”

Fair One—

I'm a minister's daughter believing in texts,
And I think all the newspapers bad,
And I'd make you remove your arm, were it not,
You were “making the waist places glad”.

Personals

Dr. Willmott is reported progressing favourably from his recent attack of typhoid.

The college is fortunate in securing the services of Dr. Kennedy as assistant in the Orthodontia department.

Dr. Risdon has also been added to the faculty as professor of anatomy.

Like a bolt from the blue came the news that Claremont '20 was in the hospital minus his appendix. He is convalescing rapidly.

We extend a hearty welcome to A. Chambers and W. C. Leggett who have returned from France to complete their course. Class '18 feels highly honoured in having in its midst two members who have done so much for their country.

The students are glad to see A. N. Laidlaw with them again. He has resigned his lieutenancy in the machine gun section in order that he may complete his studies.

We are pleased to see such a large representation from the graduating class acting as demonstrators throughout the college. Drs. Collard Brown and Loveridge are demonstrating in the Freshman Lab. in dental anatomy and Dr. Taylor in prosthesis. Dr. Loveridge is demonstrator also in crown and bridge work in the infirmary in the afternoons.

Capt. E. H. Campbell renewed acquaintances at the college recently before proceeding overseas in the C.A.D.C.

Word has been received that Pte. J. E. Irwin, 4th U of T. Co'y., has recently been wounded.

We are glad to see the smiling countenance of Dr. "Ted" Garvin with us again. Dr. Garvin is demonstrating in the Sophomore Laboratory.

Dr. Glen Pelkie and Dr. Lloyd Harriman of 1T6 were back visiting the college.

The Seniors are enjoying very much the clinics given by Dr. Clarkson. The clinics are given at the Western Hospital and are very enervating and interesting. They also appreciate the work of Dr. Risdon who has kindly consented to take part of the class, as it is too large for Dr. Clarkson to handle alone.

Dr. McLean of 1T5 was around the college renewing old acquaintance.

Among the recent visitors to our college was Dr. Springer, a graduate of Northwestern University in 1899. Dr. Springer was greatly impressed with the college, especially the infirmary.

MARRIAGES.

CLARKSON—MURRAY.—On July 12th, in the town of Clinton, Wisconsin, occurred the marriage of Dr. Harold Clarkson, '04 to Miss Mildred Murray, B.A. The wedding ceremony was solemnized at the home of the bride's parents. After the wedding breakfast the happy couple departed for a trip through the Upper Lakes.

STEWART—GREENWOOD.—A pretty military wedding took place at the residence of Mr. and Mrs. Greenwood, 203 Robert Street, on October 16th, when their daughter, Hazel, was united in marriage to Capt. H. A. Stewart, '14, C.A.D.C. The ceremony was performed by Rev. T. G. Wallace, Rector of St. Stephens. A short wedding tour was taken, after which the groom rejoined his battalion and proceeded overseas.

BIRTH.

On October 6th, to Dr. and Mrs. J. W. Coram, a daughter.

Her First Patient—But—er—the operation wont be—er—serious.

Miss Milne—Only for me, I never tried it before.

Dental Orchestra re-organizes for Season

A MEETING of those interested in the reorganization of the dental orchestra was held on Wednesday, October 11, in Lecture Room 2. The officers elected were:

<i>Honorary President</i>	Dr. W. E. Willmott
<i>President</i>	G. V. Fisk '18
<i>Vice-President</i>	R. J. M. Montgomery '18
<i>Leader</i>	R. E. Laing '18 (acc.)
<i>Secretary</i>	S. R. Dickson '19 (acc.)
<i>Librarian</i>	W. B. Mitchell '20

Plans for the coming season were then discussed. It was decided to allot a sum of money from the grant given by parliament for the purchase of a bass drum with foot-pedal. An amount was also set aside for the purchase of new music. The proposition of playing for the dental dances was also discussed but was finally abandoned on account of many of the players being union men.

The orchestra are looking forward to a very profitable and successful season's work and will welcome into its ranks any other students who play any musical instrument.

Doctor—You will have to give up all mental work for a few weeks.

Halloran '18—But, doctor, in that event my income would cease. I earn my living by writing for HYA YAKA.

Doctor—Oh, you can keep right on at that.

Fair One—How do you recognize a Gentleman in a crowded car?

Nesbitt '18—By his general get up.

EVERYTHING HAS ITS USES

Mulvihill—"Hello! Hello! Your voice sounds strained."

Fair One—"Well, it is strained. That's what the little holes in the mouthpiece are for!"

Freshman Reception

THE annual Freshman Reception was held in the Assembly Hall of the college on Friday night. As this is one of the most important events in the life of a student, the Freshies turned out in large numbers and there was also a good representation from the other years, especially the Seniors to welcome the frosh and initiate them into the ways of college life.

In the absence of Dean Webster, Mr. Mullett, President of the senior year very ably filled the position of chairman.

After a selection by the college orchestra, the programme was opened with the "Varsity" yell. The college corridors resounded to the lusty vociferations of the boys as they loosened their vocal chords and gave vent to their feelings in the yell that made Toronto famous.

Another selection was given by the orchestra. The appreciation of their playing was evidenced by the storm of applause from the students.

In a few remarks the chairman explained the reason for holding the reception. In this way the men of the different years are brought together to welcome the Frosh and make them feel that they are really part of the institution and also to promote a spirit of friendliness among the men of the college.

The next number on the programme was a duet by Messrs. Long and Mullett, after which Dr. Seccombe in a few well-chosen words expressed his appreciation at having the opportunity to be present to join in welcoming the freshmen. Dr. Seccombe believes a man's most important days are those of his student life. It is during college life that the general form of our lives is mapped out. Each one of us might be compared to a lump of clay and we each have to fashion out our own lump, and if we do it well we have ourselves to praise, while on the other hand if we do not, we have ourselves to blame. While we are young the clay is soft and easily moulded, and as we advance in years it becomes harder and less



The Freshmen were cordially welcomed.

plastic and we become more set in our ways and hard to change. It is also in our student days that we form new friendships, have new and different lines of thought and these have a potent influence during the remainder of our lives.

Dr. Seccombe said he was also glad to be associated with the Y.M.C.A. Owing to our state controlled system of education from the public schools to the university it is practically impossible to have religious training to any extent owing to the many different creeds. Hence the importance of the Y.M.C.A., it being the only active force to keep our Christian ideals before us under our present system of education. For this reason every man should lend his full-hearted support both financially and morally to the institution.

Another selection from the orchestra was followed by a recitation from Dr. Drummond, by Mr. Nesbitt. Mr. Nesbitt has considerable talent in this line and his recitation was exceedingly well rendered.

Mr. Long next favoured us with a solo and a selection from the college quartette closed the musical part of the programme.

After partaking very generously of this sumptuous repast the Reception passed into oblivion with the singing of the National Anthem and giving the college yell.



Election Night

The elections for the several offices of the different years were held in the reading and lecture rooms of the R.C.D.S. on Friday evening, October twentieth. In previous years it has been the custom to hold these elections some time in January, but owing to the special summer session it was necessary that new officers be elected for the regular fall and winter terms.

The polls opened at seven o'clock and closed at eight. During that time an excellent representation of the students of all years manifested their wishes by the marking of an X opposite the name of their favourite candidate.

While the ballots were being counted the student body adjourned to the assembly hall where a programme consisting of solos, readings, quartettes, and selections by the school orchestra had been arranged.

W. H. Scott, the former president of parliament presided over the meeting in his usual easy manner, and dispensed broadcast some excellent words of wisdom amongst the Freshmen.

From time to time word came from the counting room, of the successful candidates. Calls for speech! speech! filled the air, to which the several gentlemen responded, expressing in a very able manner the appreciation of the honour conferred upon them, promising to serve the class faithfully and do all in their power to make the coming year one of the best in the history of the college.

The following is a list of officers elected—

President Senior Year: H. J. Mullett President Junior Year: — McCrae. President Soph. Year: M. Lamey. President Freshman Year: C. Kelly. President of Parliament: H. W. Reid, '18. Treasurer of Parliament: S. W. Sproule

Students' Council (two members)—Junior Rep.: Strath, '19. Senior Rep.: Robb, '17.

Joint Committee (two members)—Jun. Rep.: S. M. Richardson, '19. Senior Rep.: J. Ryan, '17.

HYA-YAKA—Editor: G. V. Fisk, '18. Business Manager: H. H. Halloran, '18. Secretary: H. J. Murphy, '18. Treasurer: K. Berry, '18.

Royal Dental Society—President: E. T. Ingram, '18. Vice-President: C. J. Wood, '18. Secretary: H. A. Abell, '18.

Soccer Football—*President*: S. J. Phillips, '18. *Vice-President*: McCann, '19. *Secretary*: W. O. Kauffman, '17.

Rugby Football—*President*: M. G. Brick, '18. *Vice-President*: L. Staples, '19. *Secretary*: C. Stewart, '19.

Hockey—*President*: M. J. Mulvihill, '18. *Vice-President*: R. Milan, '19. *Secretary*: Wright, '19.

Basketball—*President*: D. Young, '18. *Vice-President*: McGowan, '19. *Secretary*: Beebe, '19.

Track Club—*President*: L. Thompson, '18. *Vice-President*: F. Drewry, '18. *Secretary*: P. L. Nesbitt, '18.

JUST THE MAN

Smith '20, on his trip down to the R.C.D.S. was a passenger on the train with a strong man, doing the two-a-day in a circus, and addressed him as follows:

“Excuse me, but ain’t you the strong man?”

“Some say I am,” was the goodnatured response.

“You can lift three tons in harness?”

“That’s my record.”

“You can hold two hundredweight at arm’s length?”

“Yes.”

“And put up 300 pounds with one hand?”

“Yes.”

“And 600 with two?”

“I can.”

“In that case, will you kindly undertake to raise this car window for me?”

Poor Fresh!

Monty '18 is very fond of evening strolls along College Street. We wonder if he is troubled with Insomnia.

Field '18—“Crowley, leave the room.”

Crowley '18—“I couldn’t take it with me, could I?”

Dr. Clarkson’s lectures with the juniors have been postponed until after Christmas as he intends to lecture to both classes together.

Athletics

RUGBY

FRESHMAN-SOPHOMORE GAME

Friday morning in a downpour of rain, the Sophomores and Freshmen met in the annual inter-year game. The ground was very bad, good football being almost impossible. Both teams appeared to have been doing some secret practising, and on account of the presence of several well known players on the Sophomore team they were favourites. The array of uniforms was worth going a long way to see. Everything from tennis to baseball outfits were worn, and the spectator who could distinguish between Sophomore and Freshman was a wonder. Both teams had a good turnout of supporters who enlivened things with their yells, although the Freshman seemed rather shy.

FIRST QUARTER

Shortly after play commenced the Sophs gained possession of the Fresh. ten-yard line. By a good tuck play C. Stewart went over the line for a try which he failed to convert. This was a nice heady play and seemed to bewilder the Freshmen. Play was more even during the rest of the quarter, the only score being a kick to the deadline by Stewart. Score 6-0.

SECOND QUARTER

Moyer of the Sophs. pulled off two startling twenty-five yard runs that brought the spectators to their feet. This brought the play close to the line, and J. Stewart went over for another try which was not converted. Score 11-0.

THIRD QUARTER

Sophs. started to do some very loose work and Fresh. gained possession several times. However, they did not seem to benefit and met with stiff opposition in their line plunges. There never seemed to be a hole made for a man to go through.

Box for the freshmen, was away better than any of his teammates, booting and running well, but getting poor protection. The only score the Fresh. could get was a rouge in this quarter.

FOURTH QUARTER

On another trick play J. Stewart crossed the line for a touch which was not converted. The Fresh. seemed to liven up a little but could not get within scoring distance and the Sophs. scored their last point, a rouge, shortly before the whistle blew. Final score 17-1.

For the Sophomores the stars were the two Stewarts, O'Leary, Wright, and Staples when he settled down to work.

For Freshmen, Box was the star. He was ably assisted by Fat Long, and Dupuis.

Although the Freshmen were beaten they were not outclassed by any means, and with a little more team play would make the Sophomores hustle. They might have used their heavy line men to better advantage.

Line-up—Sophomores: Halves, Moyer, C. Stewart, Milan; quarter, Wright; flying wing, O'Leary; scrimmage, Daryan, Dodge, Ferguson; inside wings, McGowan, Moore; middle wings, McLaurin, Hood; outside wings, J. Stewart, Staples.

Freshmen: Halves, Courville, Box, Bartholomew; quarter, Newell; flying wing, Dupius; scrimmage, Butler, Bell, Warren; inside wings, Charles, Richardson; middle wings, Long, Babcock; outside wings, Buttery, Rousseau.

Referee, Brick. Judge of Play, Brennan.

ANOTHER WAR SCARE

Clark '18—You did not wash your hands before beginning to operate on that patient.

Laing '18—I was afraid there might be some mines in the water.

Fulford '18—I hear James is burning midnight oil these nights.

Long '18—No, but his car is burning gasoline until midnight every night.

Murray '18—I'm in a deuce of a hole, Mike. Could you lend me \$1 to help me out.

Mike '18—Sure! will that be enough?

Murray '18—Oh, make it \$2, I can easy make the hole a bit bigger.

Mirth

Doctor—Have you a pain in your stomach or in your side?
Patient—Which would be the cheapest.

An awful blow—A fellow with a cold in his head.

Mills '18 (adjusting the napkin)—Shave or hair cut?

FRESHMAN'S SOLILOQUY

A solemn thought comes to my mind;
I put it up to you—
Suppose your eyeteeth all went blind:
How could you see to chew?

Sad thoughts of a sightless mouth
Need not concern us much.
So sensitive is the skin of the teeth,
We could chew our food by touch.

This riddle of blinded teeth is solved,
But we come to another question—
If your stomach teeth their function lost,
Would you have indigestion?

“METRE”

There's metre rambic and metre trochaic
And metre that's tender in tone,
But the metre that's sweeter, completer and neater
Is to meet her by moonlight alone.

Useful Hints

TO LOCAL SMALL CANALS IN A TOOTH.—In a tooth where the canals are difficult to locate place a little iodine on a peldorf of cotton in the tooth, and wash out with alcohol on cotton. The iodine will be decolorized except at the mouth of the canals where a stain will be found. The canals may then be enlarged and filled with ease.—G. V. F.

USE OF A CARD INDEX SYSTEM.—When reading the monthly dental journal it is wise to have a card system by which the articles may be filed under the title of the article and the name of the author. The page, name of magazine and month is also recorded. When necessary to refer to the article it may be located in a moment.

—G. V. F.

TO INVEST AN INLAY WITHOUT A SPRUE-FORMER—When a sprue is misplaced an inlay may be invested by mounting the inlay on a sprue wire and heating the other end and melting into the end of a roll of wax. A hot wire is laid across the end of the inlay ring and the wax roll bearing the inlay is placed in the ring and held so that the wire melts into the wax, at desired height.—G. V. F.

TO FINISH AMALGAM FILLINGS.—Smooth your amalgam filling with a wet piece of Spunk. As it is without fibre, it produces a beautiful, smooth finish. Every Dentist should have a little Spunk.

HOW TO MIX PLASTER.—Try mixing Plaster by simply sifting into sufficient water. When you think that you have enough plaster, pour off the excess water and use *without stirring*. This produces a mix absolutely without bubbles.

TO PREVENT PLASTER FROM ADHERING TO FLASK.—Wipe out the flask before using with a *soapy* cloth.

TO REPLACE A BROKEN PLASTER TOOTH.—Simply use *Liquid Celluloid*, and you can not break it in that place any more. Broken plaster casts you may mend in the same way. Any Dental Depot has Liquid Celluloid for sale.

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GUNNER O. G. DALRYMPLE.

67th Battery. Killed in action in France, November 7th, 1916,
after being only 13 days in the firing line.

THE HYA YAKA

VOL. XVI.

TORONTO, NOVEMBER, 1916

No. 2

Active Service Roll

HONOUR ROLL

Major P. P. Ballachey, 58th Batt. Lieut. H. J. MacLaurin, 43rd Batt.

Major C. E. Sale, 18th Batt. Pte. H. Greenwood, 76th Batt.

Gnr. O. G. Dalrymple, 67th Battery.

CANADIAN ARMY DENTAL CORPS.

Overseas.

Lt.-Col. J. A. Armstrong	Capt. G. E. Gilfillan	Capt. W. G. MacNevin
Lt.-Col. George Gow	Capt. W. H. Gilroy	Capt. H. C. Macdonald
Lt.-Col. G. G. Hume	Capt. R. J. Godfrey	Capt. J. W. Macdonald
Major O. K. Gibson	Capt. H. C. Goodhand	Capt. E. D. Madden
Major A. A. Smith	Capt. E. A. Grant	Capt. S. P. Marlatt
Major Geo. K. Thompson	Capt. W. R. Greene	Capt. V. C. W. Marshall
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Capt. R. H. Atkey	Capt. J. W. Hagey	Capt. C. A. McBride
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Capt. A. A. Garfat	Capt. F. R. Mallory	Capt. E. B. Sparkes

OVERSEAS—Continued.

Capt. R. C. H. Staples	Capt. L. A. Thornton	Capt. D. D. Wilson
Capt. G. H. A. Stevenson	Capt. H. P. Travers	Capt. J. H. Wiltz
Capt. H. Stewart	Capt. W. G. Trelford	Capt. A. W. Winnett
Capt. J. A. Stewart	Capt. L. N. Trudeau	Capt. J. E. Wright
Capt. D. P. Stratton	Capt. C. F. Walt	Capt. K. F. Woodbury
Capt. E. S. Tait	Capt. G. A. Wilcox	Sgt. L. S. Smith
Capt. H. P. Thompson	Capt. F. M. Williamson	

Concentration Camps.

Lt.-Col. W. B. Clayton	Capt. J. H. Zinn	Lieut. D. W. Massey
Capt. G. C. Bonnycastle	Capt. E. R. Zimmerman	Lieut. E. F. McGregor
Capt. F. H. Bradley	Lieut. J. T. Adams	Lieut. L. D. McLaurin
Capt. F. C. Briggs	Lieut. S. G. Alderson	Lieut. W. H. McLaren
Capt. C. E. Campbell	Lieut. W. W. Astle	Lieut. W. S. McLaren
Capt. A. V. Cashman	Lieut. N. S. Bailey	Lieut. G. R. McMillan
Capt. Darber	Lieut. B. B. Beaton	Lieut. G. A. Munroe
Capt. C. D. DesBrisay	Lieut. J. A. Beatty	Lieut. H. A. Nesbitt
Capt. R. W. Fell	Lieut. E. G. Berry	Lieut. F. H. Quinn
Capt. D. M. Foster	Lieut. R. W. Blackwell	Lieut. J. H. Reid
Capt. J. P. Gallagher	Lieut. R. M. Box	Lieut. W. H. Reid
Capt. B. R. Gardiner	Lieut. T. W. Caldwell	Lieut. T. E. E. Robins
Capt. J. S. Girvin	Lieut. R. Conway	Lieut. W. J. Rutherford
Capt. W. Y. Hayden	Lieut. Karl Damon	Lieut. H. A. Simmons
Capt. P. J. Healey	Lieut. J. M. Deans	Lieut. W. Sinclair
Capt. H. J. Henderson	Lieut. J. N. Dunning	Lieut. W. J. Taylor
Capt. C. M. Joyce	Lieut. H. B. Findley	Lieut. A. J. Thomas
Capt. C. C. MacLachlan	Lieut. R. W. Frank	Lieut. E. L. Thompson
Capt. Jas. M. Magee	Lieut. R. O. Howie	Lieut. T. S. Tucker
Capt. D. K. McIntosh	Lieut. H. C. Jeffrey	Lieut. J. W. Turner
Capt. H. L. Mitchener	Lieut. R. R. Larmour	Lieut. B. L. Washburn
Capt. J. A. Ross	Lieut. C. H. Lipsey	Lieut. V. D. Wescott
Capt. H. A. Semple	Lieut. L. Lemire	Lieut. C. E. Williams
Capt. S. H. Simpson	Lieut. T. H. Levey	Lieut. E. H. Wilson
Capt. Thompson	Lieut. H. C. Mann	

Divisional Officers.

Major F. Bradley	Major H. T. Minogue	Major. F. M. Wells
Major T. C. Bruce	Major F. P. Shaw	Major J. M. Wilson
Major A. Dubord	Major W. G. Thomson	Major W. W. Wright

ATTACHED TO OTHER CORPS OTHER THAN C.A.D.C.

Overseas

Major G. S. Cameron, 9th C.M.R.	Capt. J. Harper, Royal Navy
Capt. K. C. Campbell, 43rd Batt.	Lieut. A. R. Leggo, 58th Batt.
Major F. T. Coghlan, 25th Battery	Capt. J. L. McLean, 59th Batt.
Major Chas. A. Corrigan, Army Service Corps	Capt. Walter McNally, 179th Batt.
Capt. J. R. Duff, 79th Batt.	Capt. S. J. Redpath, 47th Batt.
	Capt. J. G. Roberts, C.A.M.C.

Concentration Camps

Lt.-Col. E. F. Armstrong, 159th Batt.	Capt. A. L. Johnson, 68th Batt.
Lt.-Col. Neil Smith, 180th Batt.	Lieut. A. J. Kennedy, 114th Batt.
Major H. A. Croll, 10th C.M.R.	Lieut. C. Nicholson, 129th Batt.
Major N. Schnarr, 94th Batt.	Lieut. C. E. Wright, 80th Batt.

UNDERGRADUATES**Overseas**

Capt. R. M. Barbour, 64th Batt.	H. B. Legate, C.A.D.C.
Capt. J. A. Egan	W. M. MacKay, C.A.D.C.
Lieut. R. B. McGuire, Br. Corps	E. S. McBride, C.A.D.C.
W. G. Alston, C.A.D.C.	E. C. McKee, C.A.D.C.
H. R. Anderson, 67th Batty.	J. M. McLeod, Div. Signal Corps
F. H. Barry, C.A.D.C.	C. T. Moyle, C.A.D.C.
H. G. Bean, C.A.D.C.	G. S. Murray, Army Transport
R. T. Broadworth, 67th Batty.	A. L. Norton, C.A.D.C.
A. G. Calbeck, 67th Batty.	A. R. Poag, C.A.D.C.
E. R. Dixon, Mach. Gun	G. Pollock, 67th Batty.
R. W. Freestone, 67th Batty.	R. G. Reid, Mechanical Transport
E. Garfat, 71st Batt.	W. E. Sheridan, 67th Batty.
G. W. Howson, 126th Batt.	G. A. Sirrs, Army Transport
A. S. Holmes, Div. Signal Corps	†G. H. Sloan, 30th Batt.
E. V. Humphries, C.A.D.C.	W. L. Smith, Div. Signal Corps
J. T. Irwin, C.A.D.C.	C. W. Steele
†J. E. Irwin, 4th U. of T. Co.	D. Speer, 67th Batty.
G. G. Jewitt, Artillery	F. L. Thompson, C.A.D.C.
A. W. Jones, C.A.D.C.	T. E. Walker, C.F.A.
J. V. Lally, C.A.D.C.	A. Walton, C.A.M.C.
J. G. Larmour, C.F.A.	B. Watson, C.A.M.C.

Concentration Camps

Lieut. R. Bishop, 252nd Batt.	R. G. Hyde, 125th Batt.
Lieut. T. H. O'Rourke, 180th Batt.	A. W. McKay, C.A.D.C.
A. E. Chegwin, 198th Batt.	G. F. Mitchell, C.A.D.C.
F. Cluff, 161st Batt.	E. McFeeors
A. F. Cooper, P.S.I.	T. H. O'Rourke
J. A. Egan	A. Poyntz, C.A.D.C.
E. V. Elliott, C.A.D.C.	C. C. Ramage, C.A.M.C.
R. W. Hall, C.A.D.C.	J. N. Robertson, C.A.D.C.
G. E. Harper, 118th Batt.	J. L. Rogers, C.A.D.C.
G. M. Heisz, Div. Signal Corps	W. B. Shantz
T. H. Hutchinson, C.A.D.C.	W. H. Smith, 160th Batt.

†Acting Director of Dental Services, address Ottawa. *Lieutenants rank as Captains while overseas. C.A.D.C. overseas address—Care Director Dental Services, Canadian Contingents, 23 Earls Ave., Folkestone, England.

‡ Wounded.

Department of Operative Dentistry

Royal College of Dental Surgeons of Ontario

LOCATION OF THE DENTAL PULP.

THE pulp is the source of vitality of the tooth. The dentine, enamel and cementum act as its protection. It is located in the most central portion of the tooth. Its form is a miniature of the tooth. If the tooth is wedge shaped, quadrilateral or romboidal in form, the pulp will be the same. If there are long slender cusps, angular grooves and marked marginal ridges then the horns of the pulp will be slender and other parts definitely marked. If the root is round, long and slender, so will be the pulp. If the root is flat or deeply grooved, on its sides there will be a flat canal or two canals. As teeth become older pulps become less clearly defined in form.

PECULIARITIES.—Pulps of aboriginal people are larger than those of highly civilized people. Pulps of deciduous teeth and the upper laterals of the permanent teeth are larger in proportion to the size of the tooth than others. High cusped angularly formed teeth have horns which reach high into the cusps.

FACTORS WHICH MUST BE CONSIDERED IN DETERMINING THE LOCATION OR POSITION OF THE DENTAL PULP.

CAUSE OF PULP RECESSION.

Note—Pulp-cavities become rapidly smaller until full calcification of the tooth has taken place.

Later there is a gradual reduction in the size of the pulp cavity.

CAUSES.

- (A) Chemical.
- (B) Thermal.
- (C) Mechanical.

(A) *Chemical.*

1. Excessive acid or alkaline saliva.
2. Acid fruits.
3. Application of strong drugs.
4. Acid of dental caries.

(B) *Thermal.*

1. Mouth breathing.
2. Wearing away of the tooth tissue.
3. Fracture.
4. Cavities of decay.
5. Filling (size and kind).
6. Erosion, attrition, abrasion.
7. Temperature of foods and drinks.

(C) *Mechanical.*

1. Irritation from attrition, abrasion and erosion.
2. Cutting with burs.
3. Wearing from loose dentures, crowns and bridges.
4. Tooth movement in orthodontia.

OPENING INTO PULP CHAMBERS.

PURPOSE.—Gain as direct access to the pulp chamber and pulp canals as possible with the least possible destruction of the strength of the tooth.

Small cavities and small fillings have little influence on the location of opening into pulp cavities.

1. Teeth with large cavities of decay.
2. Teeth with large fillings.
3. Teeth with neither large cavities nor large fillings.

1. (a) Cut away enamel and dentine for access to cavity.
(b) Remove soft decay with spoons and hard decay with large round burs.

(c) Cut dentine pulpwards with large round bur until a horn of the pulp is reached. (A large round bur is one slightly less in diameter than the pulp chamber).

(d) Use small round bur which will pass into the pulp cavity from horn to cut back walls as the bur is withdrawn.

(e) The walls of the cavity should be made continuous with the walls of the pulp chamber.

(f) At this time the floor or walls of the pulp cavity must not be touched with a cutting instrument.

2. (a) Cut through filling as if it were not present, using it as a wall of the cavity or cut the retention of the filling across so that it may be tipped out with a hand instrument.

- (b) Then treat as in Case 1.

3. (a) Incisors and cuspids not worn short by occlusion are best opened by drilling through the lingual in a line with the long axis of the root.

(b) The opening should be started at the junction of the middle and gingival thirds and midway mesio-distally.

(c) Bicuspid should be entered through the mesial pit. Cut the depth of the enamel mesio-distally from pit to pit. In the centre of cut widen bucco-lingually to reach the buccal and lingual walls of the pulp chamber.

(d) Upper molars should be started in the central fossa and cut mesially involving the mesial marginal ridge for greater access.

(e) Lower molars may be entered in the centre of the crown and cut mesially for free access.

(f) It is practically impossible to successfully open into all the roots of a molar tooth in the mouth through a distal or disto-occlusal cavity.

(g) It is often necessary to sacrifice the mesio-buccal cusp to reach the mesio-buccal canals.

TECHNIQUE OF CUTTING THROUGH ENAMEL.—

(a) If the point of attack is accessible to the edge of a fine stone the enamel should be cut with it as deeply as possible.

(b) If a starting point is gained a drill will cut through the enamel better than any form of bur. Drill must be $\frac{1}{2}$ to $\frac{3}{4}$ mm. in diameter.

(c) A round bur or a bibevel drill will successfully penetrate dentine if slowly directed and frequently withdrawn. Oil may help.

(d) Drills may be made by grinding opposite sides of an old bur.

(e) A fissure bur flattened on opposite sides and the point bibevelled makes an excellent drill.

In cases where the pulp chamber is constricted the orifices of the canals should be located before cutting the walls of the pulp chamber. After the mouths of the canals have been found the walls of the cavity and the walls of the pulp chamber should be made continuos.

Dentistry in West China

BY JOHN E. THOMPSON, L.D.S., D.D.S.

Dr. Thompson's work in China is one of which the dental profession has reason to be proud. In a recent lecture, on self sacrifice, Rev. Mr. Applegath of Eaton Memorial Church, paid a high tribute to Dr. Thompson and explained how through his influence the union university now being built in West China was made a possibility. Soon after Dr. Thompson went to China he rendered some dental service to the military governor of China and at once gained his confidence. When subscriptions were being taken for the building of the university he donated a handsome sum. By his generosity the civil governor likewise made a large gift. Finally the President of China, by the example of the governors made the munificent gift of \$4,000 for the building of the university. We have reason to be proud of Dr. Thompson.—*Editor.*

DURING the fall of 1907 Dr. Lindsay went to West China as a Dental Medical Missionary, the first of the kind in the world.

I graduated in '08, then put in a year as secretary of the University of Toronto Y.M.C.A. All the time I was offering myself for the foreign mission field and was finally accepted to do Y.M.C.A. work, representing the Canadian Methodist and went out to Chengtu, West China, in the fall of '09, to assist Dr. Lindsay.

For a short time before leaving Canada I was with Dr. J. E. Black on the corner of College and Yonge. The touring cars used to go by and the guide used to announce "In this building to the right there are thirty-two dentists each trying to do the other fellow". When I went to the other side of the world, I settled in Chengtu which had a population of 500,000 and the capital of the province

of Sze Chuan which has a population of 60 millions and the whole of West China with from 80 to 100 millions, about the same population as that of the United States, with only Dr. Lindsay to care for their oral treatment. So you can readily understand that shortly after I arrived I had some suffering to relieve and in my second year on the field the mission appointed me to the dental department and sent for another man to do the Y.M.C.A. work.



Dr. Thompson

I have often been asked if work in China is any different from work at home. At first I used to answer "very little", but one becomes used to the differences as the years go by and forget them until one is at home again for a while.

The first and greatest difference is working with a foreign language, the most difficult in the world and in which there are no technical dental terms and the people not educated to dentistry. One has to make his own translations and teach them to his patients and students by sample and example.

A marked difference is that a Chinese patient has to pay 50 cts. Chinese money for consultation which he gets back if he keeps his appointments. He pays silver in advance, for his work, as paper money changes often in value. In a few cases I failed to collect in advance and in only about two cases was I able to get anything. Another advantage of this method is that it helps to hold a patient until his work is finished. They seem to think we take a long time to finish their work. As a rule

they have to wait for a couple of weeks after consultation before we can give them an appointment as we are so busy. The Japanese quack dentist there take them in and finishes them up "while you wait" and a month or a year after they come to us to repair the damage and we have to keep them 2 or 3 weeks to do their work properly.

I think the Chinese as a rule have much better teeth than we have, but they come to us often when a tooth or all the teeth are past redemption. The medical missionary suffers from the same delay in consultation and is asked to operate when it may be too



Dr. Thompson and his Assistant

late and has often been called out of a nice warm cot on to a cold, cold street in the middle of the night to find his patient dead, perhaps for hours.

Because we are Christian dentists we try to do the best form of work and we want our students to be a high type of Christian gentleman and thorough good dentists so that future generations won't be able to point the finger of disrespect. To-day the dental department is held in high respect by the Chinese. So it is necessary, as far as possible, we be specialists in all departments of dentistry. We have no one with whom we can consult nor any specialists to whom we can send difficult cases of orthodontia, exodontia, pyorrhoea, electro therapeutics, oral surgery and so on. I have had a number of difficult cases of pyorrhoea. Once a lady finds out you know she has syphilis she never comes back.

I wish to relate one very difficult case. An official's wife presented herself with her teeth all loose, pus flowing from around every tooth. This had been going on to her knowledge for two years. I was sure she would die soon if I didn't take out her teeth and I was afraid she might die if I did take them out. She was suffering badly from indigestion. Chinese are afraid of any operation and I knew that her mouth would be so sore after the extraction of even a few teeth that she would never come back to have the others out, so I decided to take the risk and take them all out at one sitting. Even as students you can readily understand the large opening in the circulation was opened up to the infection of her mouth. Since coming home I heard of a patient in Chicago dying from a similar condition after the extraction of a very few teeth.

She was in no condition to take a general anaesthetic and it certainly was no case for injection so I used our old friend "ethyl" chloride and got along remarkably well. She was afraid she might die the next day or so but I had used all the precautions I knew of and she was back to see me in 3 or 4 days and I kept a watchful eye on her for a few days.

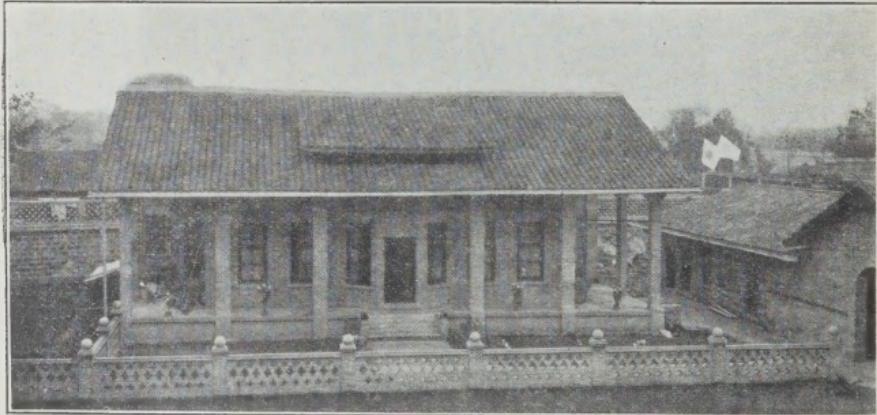
The alveolar process was practically all gone so it made a very difficult case for dentures. I wish I had had Dr. Cummer's lectures before I attempted that case. However, in 5 or 6 months colour had come back to her cheeks and she and her husband were very grateful to me and presented us with some fine fruit over and above the \$100.00 she paid for her teeth.

I did some work for the Military Governor who was also very grateful and has since been very friendly to me and has shown his interest in missions by giving \$3,000.00 Chinese money to the West China Union University. By his example \$7,000.00 more was obtained from other officials.

We have built a house and a small hospital of seven rooms and a couple of small rooms in the attic. In it we have the Keewani water system with taps and basins. It was presented to Dr. Lindsay and he has a water engine, lathe motor and fan. Compressed air is pumped by the coolie with the water which supplies the house as well; and we are able to spray the flowers and lawn. On this we have one of the finest tennis courts in the city. We lack in equipment because of the lack of money.

We have tried to educate the public by means of lectures at the Y.M.C.A., and pamphlets which we have sent broadcast and put an ad in the papers saying that these can be had at the office or by mail, a notice is also put up at the gateway. We have also put articles in one daily paper for which we had to pay.

Dr. Lindsay's first student was drowned. However we have 6 or 7 others and we hope to have a dental college in the near future.



Dental Hospital, Chengtu, one of the finest buildings in West China.

Technique for Manipulation of Silicate*

We are indebted to Dr. A. D. A. Mason for the material on cavity preparation.—EDITOR.

CAVITY PREPARATION.—The locations in the mouth and the indications for the use of silicate cements, as with most other materials used in the practice of dentistry, are fairly well defined and therefore somewhat limited. This does not mean that silicate takes a second place to any other material, but on the contrary, that it has a very decided and large field of usefulness. No dentist is giving the best to his patients who does not make use of this very valuable material.

Now as everything in this world that is worth having means a corresponding expense of energy on the part of the receiver so with the use of silicate. The dentist who wishes to obtain good results with silicate must be extremely careful of his technique from beginning to end and most important is the preparation of the cavity. 1. Obtain free access to the cavity by breaking down the enamel walls with chisel. 2. Remove all decalcified dentine. As any carious material left in cavity will discolour the finished filling. This is absolutely essential. 3. Cut good retentive form. A good flat seat and retention in the dentine for the silicate the same as with the use of gold foil. 4. Bevel the enamel margins. The cavo-surface angle should be about a right angle and under no conditions an acute angle. 5. Pay extra attention to the toilet of the cavity. 6. The rubber dam must always be used without exception and placed in position before any preparation of cavity is commenced.

MIXING.—No foreign element must come in contact with the powder, with the liquid, or with the plastic material. Do not touch with the hands. The powder bottle must be kept stoppered; the liquid bottle kept securely capped at all times, its mouth absolutely clean and free from acid. Use a large, thick, polished glass slab, kept scrupulously clean, and use for Synthetic mixes only. A slab with a rough or scratched surface, or one used for mixing other filling materials or medicines, may appear clean and

* Clinic given by Mr. L. D. Musselman at the Temple-Pattison Co.'s office to the Senior Students, R.C.D.S., Nov. 17, 1916.

yet carry on its surface elements that spoil the Synthetic Porcelain. Both in winter and summer chill the slab in cold water (60° F.) before using. (The slab, spatula and instruments should be cleaned each time with alcohol). No other kind will do. Don't use an ivory, bone or shell spatula. A metal spatula, even of tantalum, is under no circumstances permissible. In order to get a satisfactory mix the shape of the spatula is important. Do not begin to make the mix until the cavity is prepared and dried and the filling instruments laid out and at hand. Pour out near the end of the slab to your right the amount of powder the mix is likely to require, then stopper the bottle. Then with the dropper place the proper quantity of liquid (3 drops) near the other. Immediately return the dropper to the bottle and secure the cap to prevent evaporation. The best results are obtained with not less than three drops of liquid for a mix. Do not shake the liquid bottle. Make the mix promptly, for if there is considerable delay, the water in the liquid may undergo evaporation and the setting in consequence be considerably retarded. Never dip the spatula into either the liquid or the powder bottle. Begin with sufficient liquid on the slab for the mix, and do not add more liquid at any stage. The mix proceeds by drawing into the liquid successive portions of powder, thoroughly spatulating and incorporating each.

SPATULATION.—The first quantity of powder drawn into the liquid should be comparatively large, much larger than for zinc cements. This amount should be about equal in bulk to the entire quantity of liquid on the slab for the mix. Begin the mix by spatulating with a rotating motion, holding the spatula flat on the slab. When the mass becomes homogeneous, add successively small quantities of powder, spatulating each thoroughly. The proper way of working the mass between successive additions of powder is as follows: As soon as the consistency permits, scrape all the mass off the slab. Then put it back on the slab, this time getting it all off the spatula. To do this, assuming that you have a spatula such as is illustrated, do not scrape the spatula on the edge of the slab, but place it flat on the slab, holding it firmly, giving it a turn as shown. It takes but an instant to do this, and the result is that there is not a particle of the plastic mass left on the spatula. Then spatulate again strongly before adding more powder. Then add more powder, spatulating each time until the proper consistency is attained. Getting repeatedly all the mass off the slab, then off

the spatula is the only method which insures every part being reached, making the entire mix homogeneous and uniform.

PROPER CONSISTENCY.—This is easy to show but difficult to describe. It approximates plastic putty. It is not mixed as stiff as most of the silicate cements. These generally have a large excess of acid to neutralize; Synthetic Porcelain has not. It should be mixed not quite as stiff as an oxy-phosphate used for a filling, yet stiffer than one mixed for setting a facing, a crown or a bridge. When the mix begins to lose its glaze while yet plastic, the proper consistency has been attained. When the spatula is lifted the mass should not string after it; when the mass curls after the spatula, the mix is sufficiently stiff. The following suggestions will aid in giving an idea of the method to secure the proper consistency. The average time for the mix is $1\frac{1}{4}$ minutes. Average time available for filling and contouring, 2 minutes. (The temperature and humidity may cause a slight variation from this.) The time for filling is taken from the moment the mix is completed until the Porcelain begins to offer perceptible resistance to pressure; in other words, until it begins to set. If this available time is much less than two minutes, the mix has either been made too thick or the temperature of the room and of the slab is above normal. If the mass sets slower, the conditions are reversed, or the liquid has been left exposed and has undergone evaporation. The setting can be retarded by placing the slab and spatula, before use, in cold water for a few minutes, wiping thoroughly dry. Note this for hot weather. For cold weather, to hasten setting, the slab and spatula should be slightly warmed.

FILLING.—Isolate the tooth, keeping the saliva away from it absolutely. It is important that all moisture be excluded. Where this cannot be done, do not attempt a filling of Synthetic Porcelain. Have everything ready before making the mix, the cavity prepared, the filling instruments at hand (never use metal instruments of any kind. Agate or ivory instruments are preferable, but those of bone or shell will do.) See that all instruments are absolutely clean, free from grease or other deleterious elements. If for contour work, have a celluloid matrix ready, otherwise have a celluloid strip, coating one of the sides very lightly with cocoa-butter. When all is ready make the mix as previously described. Fill the cavity slightly to excess using non-metallic instruments, absolutely clean, free from grease or other impurities. Introduce the plastic porcelain into the cavity in the following manner: Take a small

quantity and cover the cavity walls thoroughly, exercising care to work it well into the undercuts. Then add sufficient of the mass to fill the cavity slightly to excess. Give especial attention to the margins; see that the porcelain is worked carefully towards and against the margins, using sufficient material for the operation, with a little excess. A celluloid strip should be used where the nature of the operation permits. This should be drawn around the filling while the porcelain is plastic, and held with slight pressure, firmly and without sawing motion, for at least three minutes or until it no longer adheres to the filling. When the strip is removed coat the filling immediately with cocoa-butter, and allow it to remain at least ten minutes (fifteen minutes is preferable) before finishing. After the porcelain begins to set or harden it must under no circumstances be worked. For contouring follow the above method, using a celluloid matrix, inserting sufficient of the plastic mass to restore the lost portion of the tooth, with a slight excess. Do not remove the matrix under three minutes. Cover with cocoa-butter immediately, and if the restoration is large, do not touch it under fifteen minutes (never less than ten). For simple cervical cavities, prepare the cavity in advance, filling to excess, with temporary gutta-percha. At the next appointment use cotton rolls, remove the gutta-percha and the gum will be found deflected. Dehydrate cavity with alcohol and paint the gum with either a weak solution of tri-chloracetic acid or collodion to prevent seepage of moisture. Fill in the usual way, holding celluloid strip in place three minutes. Coat with cocoa-butter, allowing it to remain ten minutes. Then trim down approximately, keeping away from the gum, as hemorrhage may cause discolouration. Coat with wax, dismiss the patient and finish and polish at a subsequent sitting.

FINISHING.—After the filling has been allowed to set for at least ten minutes (preferably longer) you may polish and finish, or you may coat it with wax and finish at a subsequent sitting. The filling must not be cut with chisels or reduced by any violent method, but gradually reduced and shaped by slow abrasion. Always work toward and with the margin. Use preferably cuttlefish disks or strips slightly coated with cocoa-butter. All finishing instruments must be coated with cocoa-butter—but the instruments used for inserting the material must be free from grease of any kind. Many dentists use for polishing thin linen enamel strips, slightly coated with cocoa-butter with a sprinkling of

Synthetic Porcelain powder. This is an excellent method. It is very important that the porcelain, either in its plastic state or when it has begun to set, shall not be brought in contact with heat. Therefore, under no circumstances use warm or hot air to flow the wax or to hasten the setting. Do not touch with a hot instrument. Allow the porcelain to set under natural conditions, otherwise it will be spoiled. For flowing the wax use a small metal burnisher, slightly warmed by passing through a flame—just sufficient to cause the wax to flow. Coat the filling with the varnish that accompanies the package immediately after finishing and before removing the rubber dam. For large contours caution the patient to use care for several hours.

THE SOPHOMORE'S PSALM

The Anatomy Prof. is my shepherd
and I should not flunk—
He maketh me to sit down beside
the specimen and dissect—
He showeth me the things I should
cut, and should not cut—
He jogs my memory and maketh
me to remember many things for
their names' sake—
Yea, though I work two hours
daily in the dissecting room,
I shall fear no nausea, for I
have quit eating meat.
He prepareth a quiz for me in
the midst of many skeletons—
He anointeth my head with en-
couragement, but my bean has
long ago undergone calcification.
Surely flunks and conditions
shall follow me all the days of my life
and I shall be a student in dental science forever.

—*Kansas Journal.*

Some Cases in Dental Surgery

TREATED AT THE R.C.D.S.

Case No. 1.—CHRONIC ALVEOLAR ABSCESS.

Surgeon—A. E. Webster, D.D.S., M.D.

HISTORY.—On October 20th, 1916, L. R. Davison, a senior

student presented a right upper central incisor with pus exuding from end of the root on to the lingual surface. The pulp through some unknown cause had died some 10 or 12 years previous and became putrescent. About a month previous to presentation, the condition became serious, a large abscess without a sinus following. In time pus made an opening on both labial and lingual. This condition remained for some time as one operator advised the patient that it would cure of its own accord.

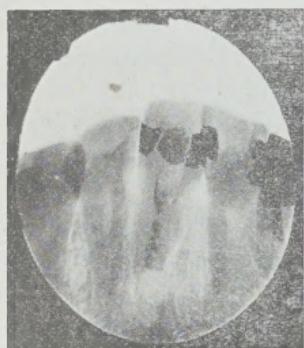


Fig. 1

Apex amputated dressing in Canal.

Upon consultation with another dentist, an opening was made through the lingual plate through the tooth and into the pulp chamber, with result of much relief to patient. After 10 to 15 days treatment abscess was apparently cured and root canal was filled. About October 15th, the condition became unpleasant with slight discharges of pus through the lingual canal. An X-ray showed a rarified area at apex of root and lack of filling at end of root, also lack of pericemental attachment three or four millimetres from the end of the root.

TREATMENT.—On the 20th of October, 1916, Dr. A. E. Webster injected a local and amputated the end of the root. In cutting through the m.m. he found the labial plate had completely absorbed over region of abscess. The walls of the abscess were thoroughly curetted and cavity washed out.

The pulp chamber was then opened, after rubber dam had been applied and canal and cavity of abscess thoroughly cleansed.

The abscess cavity was then packed with borated gauze and sealed over with sandrac. The root canal was filled with a dressing of creosote and sealed.

SECOND TREATMENT.—The gauze was removed, canal dressing also and again thoroughly cleansed. The root canal was then filled. The cone end coming through the apex which was later cut off, and a cavity prepared in the end of root for an amalgam filling. After filling was inserted the cavity was again packed with gauze as before.



Fig. 2

Indicates root filling with amalgam over apex of root.

there was no sign of pus or infection about the area.

The bleaching of the discolored crown was tried with pyrozone but with little success, as it had been long standing and had been attempted before with H_2O_2 .

CASE NO. 2.—EPULIS.

Surgeon—E. F. Risdon, M.B., D.D.S.

N.B.—This history is written up in the same form as used at the Toronto General Hospital.)—ED.

Patient, Mrs. A—, age 40, occupation—housewife. Complaint—growth in the mouth on the lower right side of the jaw.

Duration—two years.

Onset—gradual.

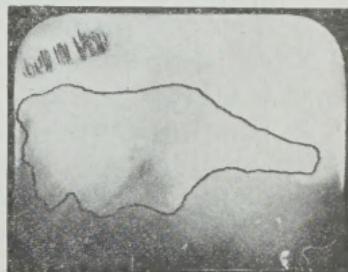
Present condition—(1) Subject symptoms. Health good, no pain from that area, but inconvenienced from the size and position of growth.

(2) Objective symptoms—In the lower jaw on one side on inspection you find a number of roots and a large, hard, pedunculated growth—(attached to the jaw firmly by the pedicle) also slight superficial ulceration. No palpable glands and no history of discharge.

Past Illnesses—negative as to value in present condition.

Cardio-vascular system—negative as to value in present condition.

Gastro-intestinal system—negative “ “ “ “ “



Outline in illustration shows size of Epulis removed.

Pulmonary system—negative as to value in present condition.

Nervous system—negative " " " "

Genito-urinary system—negative " " " "

Diagnosis—Fibrous-epulis.

Differential Diagnosis.

Must distinguish from malignant growths, also from other benign, but former of most importance.

May be—fibroma, chondroma, lipoma, osteoma, as they are all benign with no gland involvement, and slow growing.

Not likely to be—Cancer (Carcinoma) or Sarcoma, as they as a rule grow rapidly, tend to ulcerate early, more marked with carcinoma than sarcoma, also gland involvement earlier in carcinoma, and great tendency to hemorrhage from growth. Further may have loss of weight, appetite and energy, with malignant growths.

Section under microscope—showed Epulis. Sections to be shown with history as well as roentogen-ray shadow pictures.

Prognosis—excellent—if peri-osteum removed.

Treatment—full removal including alveolar process underlying the growth.

TECHNIQUE OF PULP REMOVAL AND CANAL FILLING
NOTES ON LECTURE GIVEN SENIOR STUDENTS,
NOVEMBER 17, 1916

ELMER S. BEST, D.D.S., MINNEAPOLIS, MINN.

1. X-ray examination.

2. All material used must be aseptic and taken from sterilizer direct to operating room.

3. Adjust head wrap so that only face of patient is exposed. Isolate tooth by use of dam taken from alcoholic solution.

4. Cleanse field of operation with

(a) Tincture Green Soap.

(b) Sterile water.

(c) Tincture iodine.

(d) Wash with alcohol.

5. Open into pulp chamber and cleanse with above solutions.

6. Remove pulp.

7. Remove tissue in canals—in large canals use sterile barbed broaches, in small canals select a pathfinder and, using the radiograph as a guide pass slowly into canal. Dip into 30% H_2SO_4 and pass again into canal.

8. Absorb acid with dressing bristle.

9. File wall of canal with XXX fine file and then with XX file.
10. Again introduce H_2SO_4 using larger broaches.
11. Dilute with sterile water.
12. Neutralize with Sodium Bicarbonate.
13. Dry canals thoroughly and pass sterile measurement wires.
Seal and have it radiographed.
14. Seal in oil of cloves.
15. At next sitting fill canals—pump in solution of chloroform and resin and place gutta percha cone in each canal forcing down with plugger.
16. Seal each canal with oxychloride of zinc.
17. X-ray filled canals.



"MORE HASTE LESS SPEED"

Appointment 9:30
Time 10:15

Some Little Bug is Going to Get You Some Day

In these days of indigestion it is often times a question
As to what to eat and what to leave alone;
For each microbe and bacillus has a different way to kill us,
And in time they always claim us for their own.
There are germs of every kind in any food that you can find
In the market or upon any bill of fare.
Drinking water's just as risky, as the so-called deadly whisky,
And it's often a mistake to breathe the air.

CHORUS.

Some little bug is going to find you some day,
Some little bug will creep behind you some day,
Then he'll send for his bug friends,
And all your earthly trouble ends;
Some little bug is going to find you some day.

The inviting green cucumber gets most everybody's number
While the green corn has a system all its own;
Though a radish seems nutritious, its behaviour is quite vicious,
And a doctor will be coming to your home.
Eating lobster cooked or plain is only flirting with ptomaine,
While an oyster sometimes has a lot to say;
But the clams we eat in chowder make the angels chant the louder,
For they know that we'll be with them right away.

Some little bug is going to find you some day,
Some little bug will creep behind you some day,
Then he'll get into your gizzard—
If you loose him you're a wizzard—
Some little bug is going to find you some day.

When cold storage vaults I visit I can only say what is it
Makes poor mortals fill their system with such stuff?
Now, for breakfast, prunes are dandy, if a stomach pump is
handy,
And your doctor can be found quite soon enough.

Eat a plate of fine pigs-knuckles and the head-stone-cutter
chuckles,

While the grave-digger makes a note upon his cuff;
Eat that lovely red bologna and you'll wear a pine kimona
As your relatives start scrapping 'bout your stuff.

Some little bug is going to find you some day,
Some little bug will creep behind you some day,
Eating juicy sliced pineapple
Makes the Sexton dust the chapel;
Some little bug is going to find you some day.

Dr. Graham—What is an Enzyme.

Boyde '18—An Enzyme is a thing that brings about a change
between two substances then disappears *e.g.*, a minister at a wed-
ding.

Dr. Graham (to Fauman '18, in a lecture in Bacteriology)—If for
instance you were to eat a piece of pork, what would be the result?

Fauman '18—Me eat pork? Death—no result.

WHAT THE JUNIORS WANT TO KNOW

Who ordered the extra course of ham sandwiches for our
(Hebrew) friends, during the recent Freshman-Sophomore banquet?

Boyde '18 has had the pleasure of his sister being in the city
recently. (Who knows sister or Country Cousin?)

Sproule '18—What makes those red spots on your nose.

Chambers '18—My glasses.

Sproule—Glasses! Glasses of what?

Journal agent to Regnier '18—Are you a Freshman?

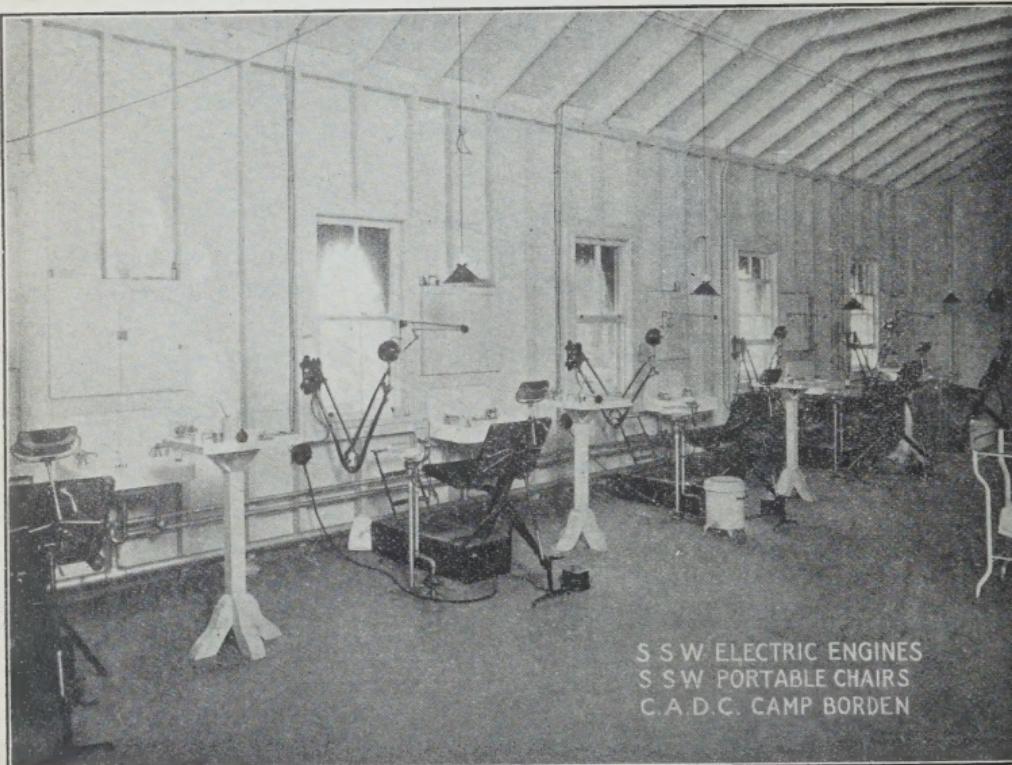
Regnier—No, a Frenchman.

Agent—Oh! I beg your pardon.

C.A.D.C. Equipment

These cuts were taken by flash light, showing the interior view of the C.A.D.C. Clinic at Camp Borden. This Clinic is considered the finest of its kind in the world.

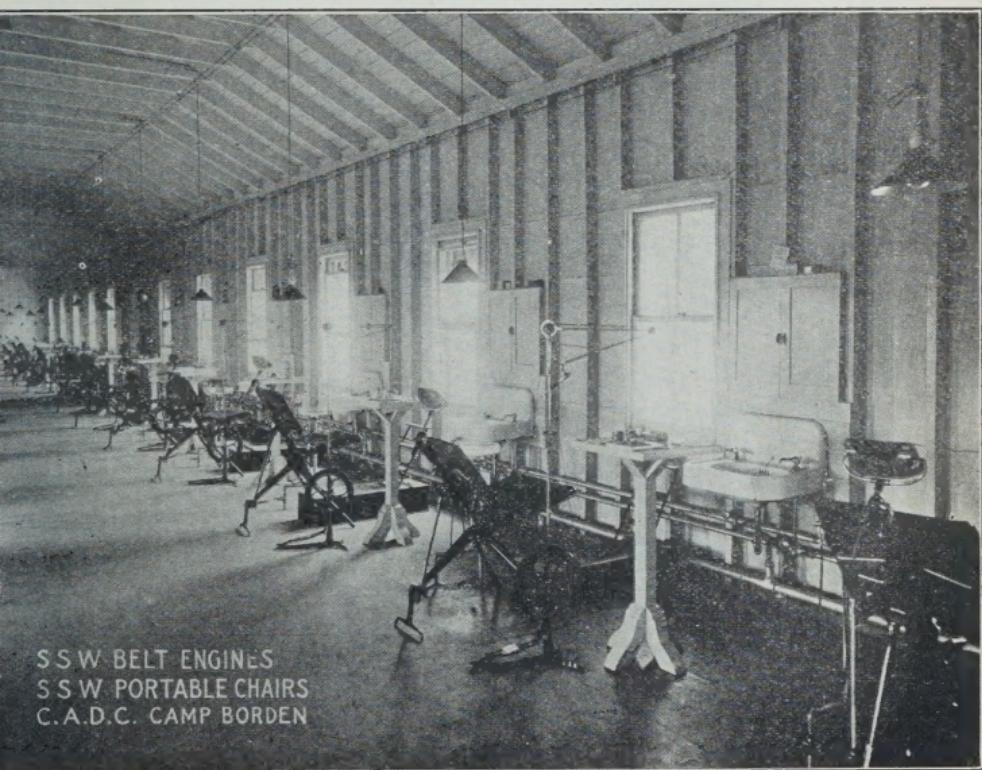
The Militia Department, after considerable experimenting, decided that it was necessary to have an equipment that was light



in weight, strong, simple and readily packed for transportation, yet one that had a convenient range of movement, and one that would stand up for years, under constant use. At the same time, it was considered wise to standardize all their equipments in Canada and Overseas, or wherever there is a Canadian Army Dental Clinic. This standardizing of equipments means that the Commanding Officer would at all times know exactly the conditions

under which the Dental Corps at the different camps were working

It was found that the regular dental chair was very cumbersome, and could not be transported from place to place. The S. S. White Dental Mfg. Co.'s Portable Chair came nearest to their requirements, and the first ones installed proved so efficient and satisfactory that they are now installing these in all new camps.



At Camp Borden, Major Thompson, the A.D.D.S., has an enclosed office for his own use. His office is fitted up with a regular dental chair and electric engine. Also, there are a number of other electric engines being used for officers at this camp.

The plumbing at Camp Borden is unique and very simple, requiring little care, yet giving the Clinic all the advantages that are to be obtained in a city office. In fact, it has been the endeavour of the C.A.D.C. to afford the best facilities for taking care of the dental needs of our Canadian soldier.

Salonika

W. C. LEGETT, '17.

IT was yet in the early hours of the morning when everybody was awakened by one of the boys yelling down the hatch "turn out boys, here's Salonika".

All were soon dressed, not a very lengthy procedure with a soldier, and on deck. A low green coast line lay upon our right, and in the distance behind the city, stretched a line of mountains, under Cape Kara Bournon lay the wreck of a transport which was torpedoed a few months ago here, in the waters we were now



General View of Salonika showing Bay.

crossing. And on the left stretched the majestic vision of the Thessalian Olympus, its high top silver white in snow, and half veiled in moving clouds. Upon the foreland of little Kara Bournon spread the tents of a British encampment and overhead hummed a couple of planes just returning from their nightly raids over the Bulgarian lines.

A mist lay over the city through which there were faintly visible houses, trees and battlements, the walls as of some old fortress, while the dark hulks of ships lay brooding in the foreground.

Slowly we entered the port, a torpedo boat twisting and turning ahead showing the passage through the mine field, which throws its protecting arm across the mouth of the harbour, and cast anchor, waiting for further orders.

Salonika presents a scene of extraordinary interest and of piquant contrast. The sile alone is one of the finest in the world. Its harbour doubly sheltered looks as though it might hold a thousand battleships, and the tranquil sea comes bouncing up to the very portals of the city.

Behind as though to shelter it from all contact with the outside world, rise in a crescent, low green hills upon which the cattle pasture; and the ancient town rises slowly up from the sea to these pleasant heights, protected by walls and towers and battlements, that display all the charm of the Middle Ages.

These old walls have now seen their day, they are visibly falling into decay, and here and there are huge gaps torn by Greek and Serbian shells when this place was wrested from the Turk in the last Balkan War.

No scene from a play could be more diverting or vivid than that which groups itself in the Rue Venegelees which is a nude thoroughfare coming from the dim Turkish Bazar full of the sentiment of a vanished age, to the sea front.

It is here that the world collects civilians and soldiers all in a bewildering variety. Frenchmen, Englishmen, Canadians, Servians, Italians, Russians, Greek, Jews and Turks, officers and rank and file. Little boys and girls who dodge about selling papers and furtively collecting those left behind to sell again; older girls pink of cheek and trim of figure, perhaps a little fluttered in such numbers of the bolder sex. Here and there a broken down old Turk or grave Moslem turning his beads and clothed in the dignity of his race.

Out behind the city one first realizes that you are upon the edge of a war. The slopes of the hills are white with tents. Here and there bodies of khaki wheeling and turning, keeping in fit condition for the expected drive. No recruits these, but veterans of many fights, of Mons and Ypres and grim old Gallopoli. Out there beyond the next rise, guns crack and roar and the machine guns join in with their staccato reports clearly audible above the general uproar. Little cotton-like puffs of exploding shells fill the air, while high above like soaring hawks the planes report results back to their own batteries.

A little farther on the first trenches appear, already ripped and torn by shell fire. Here is where the gallant men of the 10th Division under General Mahon, the men of the Connaughts, Munster and Dublin Fusilers, although outnumbered, held the whole Bulgarian army at bay from the fifth to the ninth of December.

Leaving this crest and turning back once more you are where peacefulness reigns save for the dull reports of the guns. Far down below to the left lies Lake Langaga half asleep in the spring haze. Beyond it rises the line of the Krusha Balkans with shadow and sunlight ever changing on their surfaces, and above them the cloud castles soar high into the heavens; and afar off lie the Bulgar outposts almost invisible in the sun mists on the horizon.

It is a scene so peaceful and so heavy lidded with repose that one almost thinks there is no war, and perhaps a few years later when this war is over and the soldiery of the powers gone, all the peasant will have to remind him that men once died here is the white ribbon of roads along which the people of the country ride, travel with greater ease, and here and there a trench or earthwork will suffice to tell that here once were gathered on these hills as of old before Ascalon and Antioch the allied hosts of England and France.

Barkley '19—"Say Lamey, what's the idea of this hole in this plate?"

Lamey '19—"Oh! that's the vacuum chamber."

Barkley—"What's a vacuum?"

Lamey—"It's a . . . oh! a . . . I got it in my head, but I can't express it."

McLaurin '19—"Heard your father was pinched for running a blind pig?"

McGowan '19—"Sure, the judge soaked him heavy . . . for 'cruelty to animals'."

Dr. Mason—"Yes, Babcock, one hours' uninterrupted reading each evening would make you a great dentist."

"Bab. '18 Uninterrupted! Where do you think my room-mate Barber spends his evenings?"

Chinese Quack Dentistry

CHINESE quack dentists are not so advanced as Canadian dentists. The tooth brush is an instrument that has as yet not penetrated very far into the interior of the country, and as toothache is supposed to be caused by worms that eat the teeth, the Chinese dentist confines his operations to the extraction of loose teeth and the killing of the worms that are causing the trouble. Unhampered, as our dentists are, with all those expensive accoutrements that make our bills so high, in his simplicity he sits on the ground in the public squares, or by the side of the way, a dirty cloth covered with a heap of human teeth left by relieved patients, telling more eloquently than could anything else in the way of advertisement, his skill as a dentist. Without dental chair (for his patients squat for treatment), without forceps (for he uses only his fingers for extracting teeth)—his cuspidore is the only one known in China (Mother Earth)—he needs no dental engine, drills or burrs, or those inquisitional barbs that explore our nerve canals, for he does not fill teeth, and with his knowledge of anatomy (or rather lack of it), it is a mercy he doesn't.

With that keenness of perception that characterizes the successful surgeon, he knows that the more money a patient has, the more will he be willing to part with, in order to get relief from pain, and so fixes his charges accordingly, trusting to the aching tooth to supply a persistent ally.

Among the interested people who sit around, a poor man asks to have his aching tooth relieved. As it is not loose, extraction of the tooth is out of the question, and so the dentist bargains with him for the killing of the worms. A lump sum does not appeal to the patient, so they bargain at so much a worm, and the patient at length agrees to pay at the rate of a cash and a half per worm killed. The price decided, the operation begins. With a little bone spoon, the dentist takes up a reddish powder and drops it in the tooth cavity. He then gives the patient a mouthful of water, telling him not to swallow, and to sit perfectly still. After some minutes, the patient is told to spit out the water carefully on a dry stone, or a piece of brick, and they count together, the dead worms plainly to be seen. His relief at seeing so many dead tormentors is soon

gone, as he remembers he has to pay a cash and a half for each (and there they are by the scores), and by the further fact that the tooth does not seem any better. When he complains of this, the dentist tells him the bargain was at his own wish, so much per worm, not so much for a complete cure, and that he is willing to repeat the operation on the same terms. But his string of cash is getting short, and who knows the number of worms that still remain, so very likely he goes home bemoaning, not the crookedness of mankind and dentists in particular, but his own poverty, in that he has been unable to pay for a complete cure. But where did the worms come from, you ask? In the red powder put into the tooth were very many minute seeds, that when swollen in the water and free from the red colour, looked very much like little white worms, and of course they were all dead.—*Honan Messenger*.

When Adam stepped on Eve's best gown,
She did not give him e'en a frown.
But said, as meek as any lamb,
"Indeed, I do not care, Adam."

An Irishman, who had been out spending the evening hailed a cab on his way home, and owing to his condition he did not give any instructions to the "Cabby" other than Drive!

After a while Pat thought he would ask the charge. The cabby replied "Seven fifty".

Hearing this Pat exclaimed, "Be dad, ye'll oblige me greatly by backing up until you come to thirty-five cents worth as that is all I have."

Murphy '18—"Say, Stout, I certainly think the peacock is the finest bird there is."

Ross '18—"Sure, the peacock is all right but it takes the stork to deliver the goods."

Cook '18—"Say, Mike, why did you leave your job in the Post Office to study dentistry?"

Mulvehill '18—"Well, Dave, to tell the truth I could not stand the smell of the dead letters."

THE HYA YAKA

A JOURNAL PUBLISHED MONTHLY DURING THE COLLEGE YEAR
BY THE STUDENTS OF THE ROYAL COLLEGE OF
DENTAL SURGEONS OF ONTARIO

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VOL. XVI.

TORONTO, NOVEMBER, 1916.

No 2.

Editorials

DENTAL RESEARCH

A COMPARATIVELY new branch of dentistry which has come into prominence during the last few years, and gradually grown in importance, until to-day it is receiving considerable attention, is that of dental research. For some years the dental practitioner has recognized the oral cavity to be the largest portal through which micro-organisms enter the human body. Some authorities place the percentage from 75% to 80%, but according to Dr. Price as high as 90% of the micro-organisms enter the body in this way. As a consequence of this fact we have had the great wave of oral hygiene and prophylaxis which has swept over America in the past few years, followed by the present wave of preventive measures. For some time the medical profession did not seem to be aware of the important relationship of the oral cavity to general systemic diseases until recently. Now the dentist and physician are working hand in hand in dental research, for each is necessary to the other in order that results may be obtained from the treatment of the diseases of the mouth and general system.

The work of dental research is becoming better organized throughout Canada as is shown by the establishment of research commissions in the Dental Colleges. In our own college there is a

committee who are co-operating not only with the other colleges but with the men of the profession as well as with the different departments in the College. Dr. Box who has done remarkable research work during the last two years is secretary of the committee. This work should be of vital importance to the undergraduate. This is the day of specialization. The coming graduate should seriously consider the undertaking of some such original work during his undergraduate course in order that he may avail himself of the modern facilities of the College and in order to lay the foundation for an educative and instructive means of using his spare moments after graduation, and thus be of service to his fellow practitioners.

THE WAR'S INFLUENCE UPON DENTISTRY

The phenomenal rise of the status of the dental profession since its incorporation into the army is a personal tribute to the work of the pioneer dentists who laid the foundation for the C.A.D.C. and also a creditable reflection upon the profession as a whole. That these same dentists are now performing surgical operations of the most difficult nature for the wounded men not only in the oral cavity but of the whole face is a lasting tribute to their personal ability and skill. Not only are the dentists themselves doing surgical work but some of the most eminent surgeons of the best universities in the old land who are now at the front even go so far as to refuse to perform major operations until the dentist has examined and placed the mouth in a healthy condition. This is a further testimony to the importance in their estimation of the oral cavity in its relation to the general systemic disorders.

Dentistry is no longer limited to crown dentures and fillings, but has broadened into the surgical field. No longer is the field of operation limited to the oral cavity but systemic diseases are brought to the dentist for diagnosis. Study and skill are demanded in order to keep apace with the ever-broadening scope in order that the dentist at home may be in a position to render similar service to the men in the army when they return, as they have been receiving from the dentist at the front.

The following is the advertisement of a dental depot. Wanted—

“Lady—Young, acquainted with dental supplies and to pick teeth.”

Note and Comment

The Senior Class thank the Temple Pattison Co. for the recent demonstration given them on Silicate Cements. Those who attended feel that they have learned something in the manipulation of this important filling material. On December 4th a film will be shown on Ritter Goods. Another night will be spent upon the selection of teeth and before graduation, a night will be spent on business methods.

We should like to know who the three seniors were who were refused admittance to a popular dancing academy recently.

The Sophomores are anxiously awaiting the pleasure of enjoying a Theatre Night furnished by the Freshmen.

Several of the Second Year boys like to roam through Queen's Park and view the beautiful buildings of Victoria College, especially Annesley Hall.

PRACTICAL BOOKLET.

FIFTY-FIVE MODERN DENTAL OFFICE PLANS is the title of a booklet published by the Ritter Dental Mfg. Co., which should prove interesting to every student, perhaps more especially the seniors. The booklet, which consists of sketches of model dental offices, has been prepared for the benefit of the average practitioner who has but little spare time in which to investigate and study matters of this kind. It is instructive on account of the minuteness of each detail. It is not probable that one plan will exactly suit the requirements of every room suite, yet ideas may be gained in the proper preparation of special plans. A copy will be sent by the Ritter Co. to any student on request.

Personals

Dr. A. E. Benson has taken charge of a dental practice in Leamington.

R. E. Laing '18, is again in the infirmary after an attack of La grippe.

J. L. McGowan '19 has again rejoined his class. Mac had an attack of fever followed by the chicken pox. He still seems to have a strong fever for the chickens, though.

Dr. Sid Hughes renewed acquaintances at the College.

Capt. H. A. Stewart and H. C. Goodhand, both of Class '15 were recent visitors.

Word was received of the wounding of another member of Class '19, Sergt. G. H. Sloan, who enlisted with the 40th battery. We trust his wounds will prove to be very slight and wish him a speedy recovery.

Dr. Musgrove of Niagara Falls, Ont., payed the College a flying visit this month.

Drs. G. E. Dores and C. R. Crockett of Hamilton dropped in to see old friends recently.

A. Fauman '18 has been absent from the College from an attack of La grippe.

During his vacation last summer Nesbitt was singing in one of the large (?) theatres in a busy Ontario town, and one day meeting one of his old class-mates on the street he invited him up to the Theatre that night.

He was gratefully surprised when his friend replied "Thanks old man for the tip. I had tickets".

Obituary

We regret the necessity of adding yet another name to our honour roll. Gunner Oliver Gordon Dalrymple, killed in action in France, November 3, was the youngest son of John A. Dalrymple of Bismark, Ont.

He was born on November 12, 1894, on his fathers farm near Bismark; received his public school education in School Section No. 4 Gainsboro, and his high school education at Smithville and Welland. He was a member of class '18 in Dentistry when he enlisted last April in the University Battery, leaving for overseas with the first draft on June 14, going over to France on October 16, and up to the firing line on October 20.

News of his death came as a great shock to all who knew him and especially to class '18. His sterling character and bright and cheery ways won for him the respect, esteem and friendship of all those with whom he came in contact. In losing our classmate our one consolation is that he gave his life in the highest form of service for his king and country.

Marriages

GOODHAND—GIRDLER—A pretty wedding took place at Elm St. Methodist Church on November 6, when Daisy, daughter of Mr. and Mrs. W. H. Girdler, 405 Jarvis St., was united in marriage to Capt. H. C. Goodhand, Calgary, '16 C.A.D.C. The ceremony was performed by Rev. Dr. Wilson, pastor, after which the happy couple left for a short tour to Western points.

The Staff and students of the R.C.D.S. join in wishing "Goody" all happiness and success throughout his career.

BACKUS—RENNIE—On April 27, 1916, Mr. A. A. Backus, a member of class 1T9, was united in marriage to Miss Viola Rennie of Durham, Ont. The wedding took place at her home in Durham. The young couple are residing at Phippen, Sask. The best wishes of the Sophomore year go with the young couple.

Two Noted Dentists Address Senior Students

DR. A. W. THORNTON, MONTREAL.

THE Senior Class was favoured recently with a short address from Dr. Thornton, Dean of the Department of Dentistry of McGill University. As Dr. Thornton was one of the staff until four years ago, his address was much appreciated and listened to with a great deal of interest. Dr. Thornton congratulated the men on having such a fine building and such a competent staff, men with a clear vision of the importance which the training we receive here, bears to our future success. We are going out in life to render a service to the public, second to no other in professorial life and the public are beginning to realize the fact more and more namely, that dentistry is one of the great benefactions of mankind. We should recognize our importance to the welfare of the public and also what the dentist has to know to render this service efficiently.

In order to be of greatest service we must understand the various sciences, chemistry, metallurgy, anatomy, etc., also have a knowledge of art to develop our esthetic tastes and also must we be students of colour.

One of the most important points of the address was that we must realize the fact that we are part of the healing profession and to that end we must practice surgical as well as mechanical cleanliness.

Not only must we be clean about our person but everything we use in performing any dental operation must be absolutely aseptic. In so doing we gain the confidence of our patients, besides rendering them the best possible service.

DR. ELMER S. BEST, MINNEAPOLIS

Dr. Best of Minneapolis, a graduate of the R.C.D.S., who is a specialist in root canal filling, addressed the Senior Students of the R.C.D.S. on Monday, November 20th, after a most interesting talk from Dr. A. W. Thornton of Montreal. His words were an inspiration to every student present, and this important

phase of dentistry was so clearly put forth that a new ideal for root canal work was created in the mind of every man who heard him.

Dr. Best stated that in the examination of 5000 cases of root canal work only 6 out of every 100 cases were done perfectly. A history showed that of those cases imperfectly done 70% of the patients were suffering from some general infection resulting from infection about the roots of those imperfectly filled roots.

The dental pulp is an internal organ and the same aseptic precautions must be taken as when a larger surgical operation is performed. But the problem is by no means a simple one. In many instances the dentist used to remove pulps for little or no extra charge, and patients have to be educated to pay for work even though it cannot be seen. The foundation is being laid for constructive work which must be sanitary for health.

In some cities there is a great controversy between the medical and dental professions as to whether a pulp is to be saved or removed. If the decision rests with the medical profession many more pulps will be removed. According to Dr. Best the dentist should decide whether a pulp or a tooth is to be removed when the patient is referred to him for diagnosis. Not only should the dentist rely upon his radiography apparatus in diagnosis but he should make the Farady test for vital pulps as well. The day has gone when the public will seek a dentist who will decorate them, but they will seek a man who will look after their health.

Dr. Best's lecture was illustrated with instructive lantern slides showing some of the newer devices used for root canal work.

SPEAKERS AT MEETINGS TORONTO DENTAL SOCIETY

December 4—Dr. R. Ottolengui: Treatment and filling of Root Canals.

January 22—Dr. Jas. P. Ruyl: Surgical Treatment of abnormal Edentulous Mouths Before Insertion of Dentures.

February (date not arranged)—Dr. J. Leon Williams: Evolution of Teeth with Special Regard to Their Masticating Surfaces.

C.O.T.C.

ON account of the small male registration last fall it was thought there would be no O.T.C. in the University of Toronto. The registration grew and the leading officers had meetings for the purpose of devising means of carrying on the drilling of the different companies which means so much to the student at the present time.

It was finally decided that the first and fourth year men who had not had an opportunity of drilling before, should have this privilege, and it was ascertained that there would be available only enough for one double company, some of the smaller faculties joining in with the other platoons.

The R.C.D.S. was excepted as regards the fourth year men who had already drilled. Owing to the fact that those who took the summer course had signed up for overseas service, it is deemed advisable that these men should of course drill anyway.

Owing to the illness of Dr. Willmott the Dental Platoon has been taken charge of by Lieutenant J. C. W. Broom who enrolled and attested the men most satisfactorily.

At the present time there is enrolled on the Dental Platoon sixty-four men. The attendance at drill has been rather irregular on account of the great interest taken in the soccer games, but notwithstanding this the progress made has been very gratifying to those in charge.

It is hoped that Dr. Willmott will soon be back to take up the work, as his paternal influence is greatly missed.

The Board has again decided to give the 10% bonus to those men who attend 80% of the drills.

A certain youngster in Washington was one day suffering greatly with an aching tooth. His mother was endeavouring to calm him before the necessary visit to the dentist. "You'll have it out, wont you, dearie?" the mother pleaded. "It won't hurt much, and then the ache will all be over." But the unhappy child continued to howl with pain. His brother, a year older, was likewise distressed, and added his pleadings to those of the mother. "Do have it out, dear," repeated the mother. "Yes, Dick, have it out," added the brother. "It will be one less to clean, you know."

Sophomore Banquet

ON Thursday, November 16th, the Sophomore Class banqueted the Freshman Class at the Walker House. About two hundred students assembled at the Walker House about eight-fifteen, to partake of the goodies soon to be set before them.

The banquet hall was beautifully decorated with garnet and sky blue, while each table was adorned with a beautiful bouquet of carnations and ferns. The waitresses were regularly ushered in and out to the tune of "Left, left, left!" furnished by the boys.

An amusing incident happened which was worthy of commendation and that was the fact that, after two or three attempts, which were only rehearsals—the Freshmen were able to give a year yell.

After the tables were cleared, an enjoyable programme was rendered, presided over by Mr. M. P. Lamey, pres. of class '18. Mr. C. E. Moyer proposed a toast to the King. Mr. L. W. Staples proposed a toast to our Alma Mater to which Mr. S. S. Crouch, in responding, showed his talent as a public speaker. Mr. T. C. Clemence proposed a toast to "Our guests" to which Mr. C. Kelly, pres. of Freshman year replied. Mr. J. W. Stewart proposed a toast to overseas members of 1T9, of which there are twenty-three either overseas or in training, and G. F. Mitchell, a member of C.A.D.C. responded. A. M. Hord and Editor Fiske represented the HYA YAKA and pointed out very nicely the students' duty to the college paper. Pres. Lamey and Sec. H. T. Klopp represented class 1T9, and expressed the wish that the fellowship between the classes would be freer.

Between toasts, other members of Sophomore year, pleased the gathering with violin and piano solos and quartettes. The quartette made quite a hit and it is hoped that the four minstrels will count that only as a good beginning.

Speeches were given by the presidents of the Junior and Senior years and Mr. H. W. Reid, Pres. of the Parliament. The committee who had charge of the function are to be heartily congratulated for their untiring energy in making the banquet such a grand success.

Informal Dance

THE first informal dance of the season was held in the Assembly Hall of the College on Friday evening November 3rd.

The spacious Hall was very prettily decorated for the occasion, with the College colours in bunting draped around the room and numerous pennants.

The large clusters of lights were daintily covered with bunting and these with the gorgeous half moon lent a very artistic touch to the decorations.

There was a splendid turn-out of students, also a few recent graduates graced the assemblage with their presence and many happy couples tripped the light fantastic to the dreamy strains from Mosher's Orchestra.

The most popular dance of the evening was the "Moon Waltz". For this special event the mighty moon shone forth in gorgeous splendour and gently shed its soft beams upon the merry dancers below.

The dance broke up about 12 o'clock and all present remarked they had a very enjoyable time.

Among those present were the Misses Gilbert, Mullin, Lee Guerre, Brown, Jean Card, Vera Brownlee, T. Thomas, Marjory Milne, E. Hocken, Ryan, Darnley, Slaght, Adamson, Vera Urquhart, Tulloch, Blanchard, White, Girdler, Searle, Percival, Lawrence, Jessie Milne, L. Gibson, Mary Otton, Carley, Bevim, James, Moir, C. Bogue, Brown, Simmers, Hyams, Stead, Gallsway, Gladys Bond, Mois, Elgee, Hall, Bowman, the Misses Worts, Holdroyd, Carmicheal, Penny, Sadler, Bott, Watson, Peaker, Plaxton.

The gentlemen present were Messrs. F. S. Jarman, S. W. Sproule, W. Cooper, F. Babcock, W. Lindsay, M. Brick, E. McLeod, H. Code, H. Reid, O. Bertrand, V. Lebettes, W. Hayes, L. Dawson, T. Ingram, A. B. Babcock, H. Hogg, M. Lamey, A. Colvin, S. James, H. Crowley, K. Berry, A. Hord, Capt. E. H. Campbell, L. W. Staples, MacReveller, L. D. Lewis, M. McRae, J. Maloney, H. Murphy, M. Mulvihill, C. H. Fulford, W. Seymour, A. Boyd, H. Marander, C. H. Roos, D. L. Kinzie, H. Brownlee, D. Scott, H. H. Halloran, F. Purdy, Dr. H. A. McClean, C. Leggett, J. Bartholomew, C. Beeber, C. Avery, E. Haney, R. McDowell, G. Murray, H. D. Leuty, F. Hinds, T. Shortreed.

Athletics

RUGBY

A team was entered in the Mulock Cup Interfaculty series. Because of a difference of opinion with the Varsity Athletic Association over the reinstatement of a number of our star players, President Brick was forced to withdraw the team from the series. This was done only after serious debate and with great reluctance on the part of the management. It was thought better to withdraw, than to put in a team which was not representative of the best players in the College and which would weaken the group.

BASKETBALL

Very shortly the first practise will be called in the Assembly Hall by President Young of the Basketball Club who earnestly requests any students who have played or desire to play to turn out.

Uniforms will be issued and practise hours arranged at one of the Y.M.C.A.'s.

TRACK

Owing to the war and the small number of students in the University no field day was held, and there has been nothing doing this term in track athletics.

SOCCER

DENTS 2—MEDS 0

EDITOR'S NOTE.—On account of a mix up in the group due to protests the committee in charge decided to cancel the games played and start over again with sudden death games, without S.P.S. who were out of the running. Hence as we are rather crowded for space and the games up to this time had *nb* bearing on the championship of the group they will not be reported.

Meds and Dents clashed in the first game of the group play-off, Dents being returned winners by a score of 2-0.

The play was fast from the kick-off, both teams putting up a fine exhibition of soccer. The Dent forward line was especially good and kept the Med defence busy the entire game.

For Dents it is hard to pick a star, the forwards are all fast and showed some good combination. While the defence kept the ball well out of the danger zone. Reid showed up well on the few shots he had to handle.

Robb handled the game in a satisfactory manner.

DENTS 1—FACULTY OF EDUCATION 0

Dents placed another win to their credit when they defeated Faculty by 1-0, and by so doing enter the semi-finals.

The field was slippery and spoiled the play to a certain extent, making good soccer almost impossible.

The Dents were superior in all departments, the fast forward ine keeping up a continual bombardment on their opponents goal. The only goal was scored on some pretty combination between Thompson and Day. Dundas of Faculty marred an otherwise good game by his tendency to "mix it", on one occasion taking a swing at Lippert, who, by the way was not lacking in that department.

DENTS 0—PHARMACY 0

Dents and Pharmacy hooked up in the first game of the semi-finals. Dents had by far the most play but the fullbacks for Pharmacy played a wonderful game and are alone responsible for the good showing of their team. The teams battled for the full game without a score.

DENTS 1—PHARMACY 0

The next night the two teams met again to break the tie. The ground was a little better than the previous night but not good enough for first class football.

Dents pressed the Pharmacy goal right from the start and kept up a fusillade of shots throughout the entire game. This was bound to tell, and two minutes before full time was up, Thompson tore down the wing, evaded a full back by quick dodging, passed sharply over to centre where Lippert was waiting. He carefully placed his shot in the corner of the goal and scored the first goal in nearly two hours of actual playing time.

The final whistle blew just as the ball was being faced off at centre, ending one of the most even and exciting games played in the interfaculty contests in some years. Owing to lack of space the line up for the series will be given at the end of the final game only.

DENTS CHAMPION AGAIN

McMaster and Dents met in the finals on a field covered with snow. Both teams had a large crowd of supporters who were treated to the finest brand of soccer seen on the campus for some time.

This was Dents fourth game in as many nights, and being without the services of their star full back Roos and Kaufmann, things looked anything but bright, but notwithstanding this they went on the field with a determination to win.

The game started with a rush and the ball travelled from end to end, but both defences appeared to be impenetrable until after about fifteen minutes of play on some fine combination work, Ross passed to Lippert who put Dents out in front. McMaster now came to life in earnest and for the next few minutes made things extremely interesting for Reid, who saved several times on some hard shots. Phillips then carried the ball up the side and passed to Lippert, who scored, but was declared offside. The half ended 1-0.

On resuming play, both teams went at it harder than ever, but Dents appeared to have the edge on their opponents, raining shot after shot on the McMaster goal but couldn't seem to increase their lead. Twiss, in goal playing a remarkably fine game. But Dents were not to be denied, and finally on a pass from Thompson McMaster fouled in front of the goal. Lippert kicked the penalty and scored on a well placed shot. McMaster now saw their championship chances dwindling and made a desperate effort to overcome the lead but couldn't penetrate the Dent defence, making rush after rush but to no advantage. On account of the heavy going, play began to lag a little, and the players were "all in" when the whistle ended the best game of the season.

The following men have figured on the line up for the several games of the season: Reid, Colvin, Smythe, Phillips, Chambers, Butler, Thompson, Day, Ross, Lippert, McCann, Babcock, Kaufman.

COMMENT

Congratulations to Captain Roos on the magnificent showing of the Soccer team.

The new members of the team ably did their part, and this year's team was equally as strong as last year's star team.

Pharmacy can show us a few things about turning out to support a team. Practically every student in their College was out to their games and, we are sorry to state, this cannot be said about our students.

Reid has not had a goal scored on him in two years, a record for interfaculty soccer.

Captain Roos was called home on account of serious illness to his father and this was a hard blow to the team.

Mirth

Jones '18 and his girl went to the movies to see "Neptune's Daughter". When the beautiful Anneto Kellerman appeared Miss — blushed and turning to her "fair" companion said, "Dearest, that woman certainly beats me".

And then she became angry when he agreed with her.

Schaefer '18 went up to the box office at Loews with his little brother Abey. "Gif me von dicket," he said.

"You'll have to have one for the boy, too," said the ticket seller.

"My life on it," said Schaefer, "he vont look."

Dr. Grieve—"Well, Maranda, what did you do for your patient this morning?"

Maranda '18—"Oh, I just sealed in oil of cloves and sent the kid home."

And we wonder why James '17 is always whistling "Molly dear, it's you I'm after."

A barber wrote a scenario which he submitted to a prominent manager with a request for criticism and advice.

The manager wrote:

"My dear Sir":

"Cut hair. All the time—hair. Cut hair."

Mike Brick '18 and his fiancée went to a movie show on Queen Street, and as the theatre was dark they stopped a few rows from the back.

"Can we squeeze in here?" Mike asked

"Go as far as you like, Mike," replied the coquetish young maiden, "if you think we can get away with it."

Dr. Cummer—"That's all right, only your articulation is poor."

Regneer '18—"Gee whiz! I can't help that, I'm French."

During some skirmishing the last "Field Day" the following was heard.

Phil '18—"Lie down, Drewry, if you did that in a real war you would be shot."

Drewry '18—"I know Phil, but the grass tickles my nose."

Miss Milne '18—"Say, Pete, don't you think that a pretty girl over there."

Halloran '18—"Sure, but any old barn looks good with a new coat of paint."

"I tell you," said Murphy '18, "the ould friends are the best, after all, and, what's more, I can prove it!"

Mulvihill '18—"How are you goin' to prove it?"

Murphy '18—"Where will ye find a new fre'nd that has shtud by you as long as the ould ones have?"

"When ye're whipped," said Pat, "ye ought to say ye've had enough."

"If I've the strength left to say I've had enough," replied Mike, "then I'm not whipped yet."

Lamey '19 to Lebbetter '18 at Walker House—"Say, Freshie, I'm sorry, but you'll have to stand in like at the rear as only Sophs go in first."

Maranda has started chasing cats as a past-time, but so far he has not succeeded in catching any.

Fulford '18—"Well, Mac, I hear your infirmary practice is increasing."

McLachlan '18—"Yes, my patient gained 10 lbs. last month."

Dr. Ante—"I see your smoking 'Twofer' cigars now."

Temple '18—"Yes, two-for five."

Plunkett '17 (to his new patient)—"Have you been anywhere else?"

Patient—"I went to see the druggist."

Dentist—"And what idiotic advice did he give you?"

Patient—"He told me to come and see you."

PAINLESS EXTRACTION

A tourist while "doing" California, noticed a long shanty which displayed the following sign:—"Teeth yanked out without a twinge." As he happened to be suffering from toothache, he entered the shanty and asked the dentist:

"Do you extract teeth without giving pain?"

"Waal, I reckon so, stranger."

"All right; pull this one out," indicating the offending molar.

The dentist whistled, and in walked his assistant armed with a club.

"Now, pard," quoth the dentist, "stun him!"

Family Doctor (to Miss Milne who is ill)—"You should take a tramp every morning through the woods before breakfast."

Miss Milne '18—"Oh, Doctor, I can get better company than a tramp."

Lieut. W. Sinclair (in C.A.D.C.)—"My dear Sir, it is a miracle that you are alive to-day with such badly abscessed teeth."

Patient—Yes sir, that's what my friends said when I told them you were attending me."

Broom '18—"D'ye ken Mac fell in the river on his way hame last nicht?"

Leuty '18—"You don't mean to say he was drowned?"

Broom '18—"Not drowned, mon, but badly diluted."

Dr. Bright '18 (to Horse Dealer)—Why didn't you inform me, before I purchased this horse, that he is blind in the left eye?

Horse Dealer—Well, Doc, the fellow that sold the animal to me didn't mention the fact, so I just naturally thought it was a secret.

"My husband," remarked to a group of friends, "was a confirmed smoker, with a tobacco heart, when I married him a year ago, but to-day he never touches the weed."

"Good," said one of the group. "To break off a lifetime habit requires a strong will."

"Well, that's what I've got," said the wife.

The man who goes the pace is generally a poor driver.

There are two reasons for bachelorhood: cowardice and poverty.

Useful Hints

CLEANING THE CEMENT SLAB.—Diluted nitric acid will remove all cement particles no matter how hard and the slab after rinsing with water will have a clean smooth surface.—*Dental Review*.

REMOVING CHLORO-PERCHA STAINS FROM A CAVITY.—After a root-filling has been inserted by means of chloro-percha, it is usually found that the surplus adheres to the walls of the cavity and is very difficult to remove entirely. This can be readily done by dipping a pledge of cotton in absolute alcohol and swabbing out the cavity. Chloroform simply tends to spread the material more evenly over the walls whereas the alcohol completely removes it.—*Oral Health*.

TO WASH OUT WAX FROM INVESTMENTS.—Place the investment in boiling water and through a piece of *rubber tubing* of suitable length blow upon the wax. The bubbling rapidly dislodges all particles of the wax.

TEST FOR VULCANIZATION.—A plate will be found to be perfectly vulcanized if the shavings are *springy* and not brittle.—*Pacific Dental Gazette*.

TO CLEAN IMPRESSION TRAYS.—Remove the wax by heating and wiping with paper or cloth. Then boil in a solution of washing soda.—*Dental Review*.

AN AID IN CARRYING PUMICE.—When using felt cones or wheels in polishing rubber plates, gold crowns, etc., hold a piece of *Soap* against the wet cone before applying the pumice. The soap on the cone prevents too much heat and will also carry the pumice.—*Dental Summary*.

VINEGAR FOR SOFTENING PLASTER.—Vinegar is a very good means for removing hardened plaster of Paris from the hands, or from flasks. Plaster models can be easily removed from an articulator by pouring a little vinegar on the portion where the bow is embedded in plaster.

TO REMOVE ADHERING PLASTER FROM VULCANITE PLATES.—Place the plate for a short time in water containing a small quantity of *Sulphate of Potassium*.—*Dental Forum*.

CLEANING CEMENT SPATULA.—Allow the spatula to remain a few minutes in water and the half solidified Cement is easily wiped off.

KEEPING AN AMALGAM MORTAR CLEAN.—After having thoroughly mixed the alloy and mercury, a few drops of alcohol are poured into the mortar and the amalgam is reground. The alcohol will clean the amalgam considerably, allowing a higher polish subsequently; moreover, when inverted the amalgam will readily fall out of the mortar, leaving the latter clean. The alcohol can easily be drained out of the mortar before the amalgam is tipped out.—*Oral Health*.

SEPARATING MEDIUM.—Pink wax dissolved in gasoline, and a little indelible pencil added for colouring makes a good separating medium.—A. C. '17.

ADJUSTING A PIN CROWN.—In setting a pin crown of any type it is always well to supplement the roughness of the post with a few barbs cut on it with a pocket knife, also where possible to make a slight groove around the post hole to provide a small undercut.—S. R. D. '19.

TO KEEP BENCH CLEAN.—An old catalogue or magazine is very handy on the plaster bench when pouring impressions or mounting on an articulator, since when one sheet has been soiled tear it off and it leaves the next ready for use. This eliminates the usual annoying lump of plaster on the bench.—S. R. D. '19.

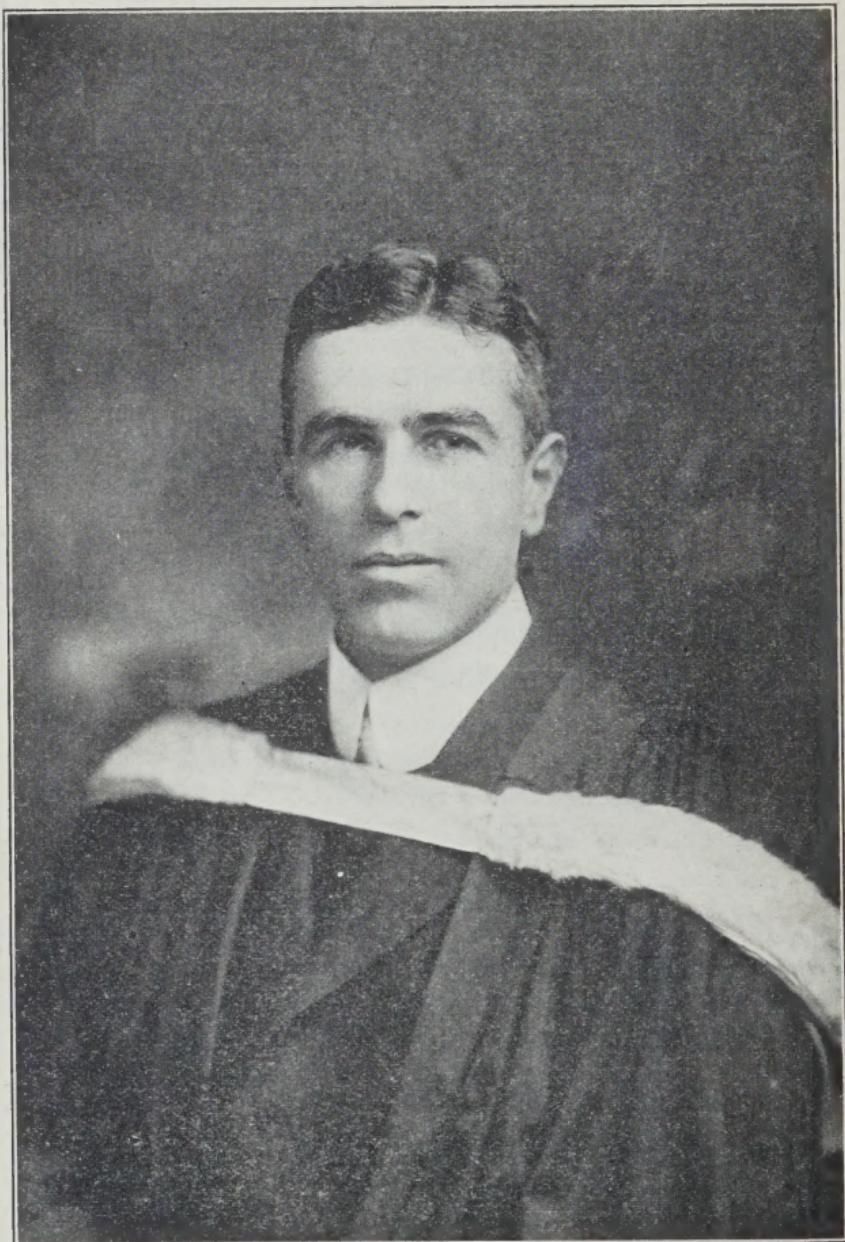
ADAPTATION OF METAL BASES.—In finishing the swaging of a gold or aluminium plate take a small piece of hard wood about $\frac{1}{2} \times \frac{1}{2} \times 4$ inches and point one end like a small wedge. Then place the denture on the zinc model and go over all the details such as rugae, etc., with the stick and a mallet, and it brings out all the details nice and sharp. Frequent sharpening of the stick is necessary.—S. R. D. '19.

HYA YAKA

CONTENTS

DECEMBER, 1916.

	PAGE
E. F. Risdon, M.B., D.D.S., L.D.S.	<i>Frontispiece</i>
Active Service Roll.....	93
Etiology and Treatment of Oral Tumors.	
E. F. Risdon, M.B., D.D.S., L.D.S.	96
Medical Aspects of Dental Infections and their Relation to Dentistry. H. K. Detwieler, M.B.	101
Fixed Bridgework. A. E. Stewart, D.D.S., L.D.S.	108
Use of Elevators in Exodontia. E. W. Paul, D.D.S.	112
Some Cases in Dental Surgery.....	116
C.A.D.C.	119
The Freshmen. Roy W. Stevenson.....	120
Dentistry and Medicine.....	122
Freshmen Enlist in C.A.D.C.	124
Editorials.....	126
Personals.....	128
Informal Dance and Freshman Dance.....	129
C.O.T.C.	130
What the Students are Doing at the Front.	
Capt. Bishop	131
Students' Parliament.....	132
Royal Dental Society Meeting.....	133
Dental Debating Society.....	135
Athletics.....	136
Mirth.....	138



E. F. RISDON, M.B., D.D.S., L.D.S.
Professor of Anatomy, R.C.D.S.
Who expects to leave for Overseas Service very shortly.

THE HYA YAKA

VOL. XVI.

TORONTO, DECEMBER, 1916

No. 3

Active Service Roll

HONOUR ROLL

Major P. P. Ballachey, 58th Batt. Lieut. H. J. MacLaurin, 43rd Batt.
Major C. E. Sale, 18th Batt. Pte. H. Greenwood, 76th Batt.
Gnr. O. G. Dalrymple, 67th Battery.

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 Lieut. E. H. Wilson

Divisional Officers.

Major F. Bradley
 Major T. C. Bruce
 Major A. Dubord

Major H. T. Minogue
 Major F. P. Shaw
 Major W. G. Thomson

Major. F. M. Wells
 Major J. M. Wilson
 Major W. W. Wright

ATTACHED TO OTHER CORPS OTHER THAN C.A.D.C.**Overseas**

Major G. S. Cameron, 9th C.M.R.
 Capt. K. C. Campbell, 43rd Batt.
 Major F. T. Coghlan, 25th Battery
 Major Chas. A. Corrigan, Army Service
 Corps
 Capt. J. R. Duff, 79th Batt.
 Capt. O. A. Elliott, C.A.S.C.

Capt. J. Harper, Royal Navy
 Lieut. A. R. Leggo, 58th Batt.
 Capt. J. L. McLean, 59th Batt.
 Capt. Walter McNally, 179th Batt.
 Capt. S. J. Redpath, 47th Batt.
 Capt. J. G. Roberts, C.A.M.C.

Concentration Camps

Lt.-Col. E. F. Armstrong, 159th Batt.	Capt. A. L. Johnson, 68th Batt.
Lt.-Col. Neil Smith, 180th Batt.	Lieut. A. J. Kennedy, 114th Batt.
Major H. A. Croll, 10th C.M.R.	Lieut. C. Nicholson, 129th Batt.
Major N. Schnarr, 94th Batt.	Lieut. C. E. Wright, 80th Batt.

UNDERGRADUATES**Overseas**

Capt. R. M. Barbour, 64th Batt.	H. B. Legate, C.A.D.C.
Capt. J. A. Egan	W. M. MacKay, C.A.D.C.
Lieut. R. B. McGuire, Br. Corps	E. S. McBride, C.A.D.C.
Lieut. T. H. O'Rourke, 180th Batt.	E. C. McKee, C.A.D.C.
W. G. Alston, C.A.D.C.	J. M. McLeod, Div. Signal Corps
H. R. Anderson, 67th Batty.	C. T. Moyle, C.A.D.C.
F. H. Barry, C.A.D.C.	G. S. Murray, Army Transport
H. G. Bean, C.A.D.C.	A. L. Norton, C.A.D.C.
R. T. Broadworth, 67th Batty.	C. Parker, C.A.D.C.
A. G. Calbeck, 67th Batty.	A. R. Poag, C.A.D.C.
E. R. Dixon, Mach. Gun	G. Pollock, 67th Batty.
R. W. Freestone, 67th Batty.	R. G. Reid, Mechanical Transport
E. Garfat, 71st Batt.	W. E. Sheridan, 67th Batty.
G. W. Howson, 126th Batt.	G. A. Sirrs, C.A.D.C.
A. S. Holmes, Div. Signal Corps	†G. H. Sloan, 30th Batt.
E. V. Humphries, C.A.D.C.	W. H. Smith, 160th Batt.
R. G. Hyde, 123rd Batt.	W. L. Smith, Div. Signal Corps
J. T. Irwin, C.A.D.C.	C. W. Steele
†J. E. Irwin, 4th U. of T. Co.	D. Speer, 67th Batty.
G. G. Jewitt, Artillery	F. L. Thompson, C.A.D.C.
A. W. Jones, C.A.D.C.	T. E. Walker, C.F.A.
J. V. Lally, C.A.D.C.	A. Walton, C.A.M.C.
J. G. Larmour, C.F.A.	B. Watson, C.A.M.C.

Concentration Camps

Lieut. R. Bishop, 252nd Batt.	A. W. McKay, C.A.D.C.
A. E. Chegwin, 198th Batt.	G. F. Mitchell, C.A.D.C.
F. Cluff, 161st Batt.	E. McFeeors
A. F. Cooper, P.S.I.	A. Poyntz, C.A.D.C.
E. V. Elliott, C.A.D.C.	C. C. Ramage, C.A.M.C.
R. W. Hall, C.A.D.C.	J. N. Robertson, C.A.D.C.
G. E. Harper, 118th Batt.	J. L. Rogers, C.A.D.C.
G. M. Heisz, Div. Signal Corps	W. B. Shantz
T. H. Hutchinson, C.A.D.C.	

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‡ Wounded.

Etiology and Treatment of Oral Tumors

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Read before the oral surgery section of the Panama Pacific Dental Congress, San Francisco, August, 1915.

THE title of this paper suggests that all Oral Tumors are referred to, and in this respect it is misleading as it is the intention to discuss only the etiology and treatment of Carcinoma, Sarcoma, Fibroma and Epulis. The purpose is to treat the above subject as practically as possible, giving only the etiology which is accepted generally and of value clinically. Also in regard to treatment, a full but concise outline of the same will be given.

CARCINOMA.

Etiology.—Cancer is thought to be due to chronic irritation, dental or mechanical, smoking, extension from the cheeks or lips or metastatic origin. As statistics show that Carcinoma is four times more frequent with men than women, would it be fair to say that smoking may have at least a predisposing effect?

Treatment.—Early diagnosis is the first step in the treatment and nothing should be left undone which would aid in arriving at this conclusion. The first step is to remove a section for pathological examination from the growing margin of the tumor. When the diagnosis of Carcinoma is made, one must be most guarded against giving that unwarranted exhilarating ray of hope or too cheerful a prognosis. Seldom is the surgeon justified in dealing with this dreaded disease unless he removes the entire field including a clear area encircling the growth. Free removal with the minimum disfigurement is the rule. The charge has been made that the surgeon in this country is too readily satisfied in these advanced cases with having the patient returned to bed alive, knowing the immediate high mortality, and neglects to remove as extensively as is imperative. If the case is well advanced, nothing short of total excision of the upper jaw and a thorough

search into the various sinuses should be considered. Partial excision in certain well selected cases in the upper jaw may be undertaken with reasonable safety, but in the lower jaw an exarticulation or resecting is the procedure promising the best results. It has been the practice to resect the glands on both sides of the mandible in carcinoma. Seldom is a cure effected and on this account every case should have a subsequent treatment of Rontgen Rays or Radium. There is no doubt that the Rontgen Rays retard the growth, at least for a time, and that Radium in some cases completely alters the microscopic appearance of the neoplastic tissue.

SARCOMA.

Etiology.—The importance attached to injury as an etiological factor is still in doubt, but is receiving greater attention. In all text books series of cases are reported giving a history of acute trauma, some as high as twenty-three per cent. I have had two cases come under my observation where trauma seemed to have had some influence. One of a young girl of seventeen who on May 26, 1913, fell from a hammock and injured the upper portion of her tibia. On June 16 she was operated on for osteitis with little or no improvement. On October 24 her leg was removed, a diagnosis of Sarcoma having been made.

Treatment.—Here again early diagnosis is imperative and to aid this, a section must be removed. The pathological report here is of greatest value as upon this report depends not only the prognosis but also the decision as to the extent of the operation. If round-celled or melanotic Sarcoma is found, the treatment must be most radical, but if a giant-celled or fibro-Sarcoma, the prognosis is more favourable and a less mutilating operation may suffice. These cases are never to be considered cured until after five years and up to that time must be watched for recurrence. Metastasis take place to other parts, sometimes very early with this form of growth. One meets many border-line cases in surgical practice but a safe rule is, if the growth is increasing slowly and the skin not involved generally considered safe to operate, but if rapid growing and ill-defined, the skin involved, the orbit invaded and enlarged glands, it is not likely that the patient will receive any benefit from the operation. In these cases, it is plainly the duty of the surgeon to be frank and to advise the use of Rontgen Rays, Serums or Radium. The glands in Sarcoma are rarely

involved but where palpable should be removed. It is now considered that in giant-celled Sarcoma that bridges of bone may be left in most cases to maintain the contour of the face. In early cases, Radium is considered a specific according to a report by Dr. Abbe in the Medical Record of March 15, 1913. Here again as in Carcinoma, all cases should receive, subsequently, Rontgen Ray or Radium treatment, the latter to my mind to be preferred.

FIBORMA.

Etiology.—Is unknown but Broca is of the opinion that Fibroma arises from displaced tooth-buds. Nimmer and Blauel think they arise from the connective tissue of bloodvessels or from the periosteum of the jaws. There are two varieties—periosteal and central—the names clearly indicating the location of each.

Treatment.—Fibroma, strictly speaking are rare, so must be viewed with suspicion as in Sarcoma one finds considerable fibrous tissue. As to operative treatment, the removal should be complete, but in all cases, not too far advanced, bridges of bone can safely be left; still we should be thorough as recurrences are frequently malignant.

EPULIS.—Is frequently spoken of as Sarcoma but this is no doubt due to an error in diagnosis. The word "Sarcoma" and "Epulis" must in the near future mean on the one hand malignancy, and the other, benignancy, still one must remember that as a tumor it lies midway between inflammation and new growth.

Etiology.—Local causes must receive consideration such as infection around retained roots and trauma. It originates from the periosteum of the aveolus or tooth-socket, or from the connective tissue underlying the mucous membrane. The giant-celled Epulis is more likely to be found associated with infected roots than the fibrous type and these on the other hand may arise from around apparently normal roots.

Treatment.—In the treatment of Epulides, the prognosis is always favourable after early and radical operation. That is to say, that in all cases a portion of the alveolus must be removed at the time of the operation, always bearing in mind that recurrences are likely to be malignant. Further, the operation for the fibrous Epulis is less radical than for the giant-celled variety.

In the case of the fibrous Epulis, all that seems sufficient is to excise the growth and cauterize the base with the actual cautery,

but have the case under observation for some time subsequently. In the case of the giant-celled Epulis, the operator will likely be compelled to remove a tooth on each side of the growth as well as a section of the process. Metastasis seldom or never occur.

Radium as a curative agent is receiving considerable attention at present and some prominent men claim that it will suffice for the eradication of Epulides. In *Medical Record* of March, 1913, Dr. R. Abbe of New York, recommends it for the giant-celled variety of Epulis, without any further operative treatment. He says—"Thorough surgery is still the supreme reliance in eradication of malignant disease of the mouth, and early resort to it is the patient's chief hope of cure. Still Radium has many interesting conquests in this field but in advanced cases of cancer its good is transient—in giant-cell Sarcoma it is a specific" He says further—"The vicious causative effect of tobacco in the mouth is demonstrated. Leucoplakia has no curative remedy unless it be Radium". Dr. Abbe is given the credit for being the first in America to introduce tubes containing Radium into the centre of tumors. The reported results in Sarcoma are good and Dr. Wickham of Paris has been equally successful. Dr. W. H. B. Aikins of Toronto in the Canadian Practitioner in a paper entitled "Recent Observations on the Therapeutic Use of Radium" reports as follows: "This brings us to what seems to be the great hope from Radium treatment. It is the combination of surgery with the use of radium. The surgeon can devise methods by which the apparatus may be brought into contact with the deep lying malignant growths, particularly those in bladder, rectum and uterus. Cases have been reported in which by such a combination either an inoperable case has been converted into an operable one or after the surgeon has removed all of the growth possible, radium has been used with good effect on the malignant tissues remaining. Furthermore, radium has been used after operations for malignant growths infiltrating the operative area with rays, so as to kill any cancer cells which may have been missed at the time of operation". He cites a case of a farmer aged fifty-three who in February, 1909, noticed a lump at the angle of the jaw on the right side. X-rays were used without any apparent effect as the mass was increasing. In April, 1910, the tumor was removed and showed a round-celled Sarcoma. In June it recurred; excision again advised but a facial paresis had followed the first operation so the patient would not consider further operative procedures. He was, there-

fore, referred for radium treatment. The cross-fire method was used, a plaque being placed on each side of the tumor. The beginning of October the mass was two inches in diameter and elevated three-quarters of an inch, and was attached to the angle of the jaw. On October fifth, an incision was made into the tumor and a small silver tube containing one centigram of pure bromide of radium with an activity of two million, was inserted deeply into its centre and left for twenty-four hours. At the end of this time there was a cavity into which the finger could be inserted; the growth felt much softer and was more movable. Broken necrotic tissue was discharged from this opening. This treatment was repeated in twelve days except that the tube was inserted for only two hours for six days with a plaque applied externally to produce cross-fire action. At the end of one month, no tumor mass could be seen and on palpitation two small masses which felt like scar tissue could be felt. We regard this as most a gratifying result but he would be a foolish man indeed who would in any sense regard the case as cured.

The following changes have been seen to occur in neoplastic growths where radium had been used and subsequently growth excised:

First.—A hypertrophy is noticed but if sufficient dosage is given, an elective cellular necrosis supersedes and when necrosis becomes marked, the connective tissue cells multiply and there is a marked leucocytic diapedesis. Reporting again from *The Canadian Practitioner*, a paper by Dr. Aikins—"Radium in the Treatment of Sarcoma" in which he says speaking of the changes due to radium: "The tumor parenchyma which has proliferated prematurely and irregularly, is badly fitted to resist the shock of the emanations of radium and the deficiently nourished and inadaptable cells succumb quickly under conditions in which the normal types, from which they are derived, would resist. Further, the more cytological type of the tumor, is removed from the normal adult type, the less resistant is it, and thus amongst the Sarcomata the atypical type is less resistant than the fibro-blastimata". My own faith in radium makes me feel that in direct proportion to the proximity of the Radium rays to the individual atypical cell, the greater the success or failure of this form of treatment will be noticed.

Medical Aspects of Dental Infections and their Relation to Dentistry.

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[Read before the Royal Dental Society, Toronto, December 18, 1916.]

LADIES AND GENTLEMEN:—

Now I am not going to take very long. I was asked to make my paper about twenty minutes, and it will not be much longer than that.

You are all acquainted with the history of Dentistry, and therefore know that there was no division between Medicine and Dentistry until the time of Hippocrates, 500 B.C. He was the first man to mention Dentistry as a separate branch of medicine or science, and it has gone through wonderful changes from that time. From then until now history has been in the making, and we are very fortunate to live in this particular time, when such changes are being brought about by science.

About 1,700 was the time when dentistry really took on some dignity. At that time the French took up the matter seriously, and the first book on dentistry written by Fauchard, came out dealing with the anatomy and physiology of the mouth, and from that time on we have had schools, worthy of the name.

At that time the dentists were apprentices, and there were no schools for them. Even from that time on, through the eighteenth century, there were very few schools. I mention this merely to show what a vast change is taking place in your profession, and to introduce what I have to say, or what has been discovered regarding mouth infection.

MEDICAL ASPECTS OF MOUTH INFECTIONS.

A large part is in connection with dental surgery, not only in the matter of fillings, and antiseptic dentistry, but also in the medical aspect of infections of the mouth.

I became interested in this cause a couple of years ago. We were studying certain medical conditions, particularly Endocarditis, when we found a peculiar organism in the blood of patients

suffering from this disease. This organism belongs to the family of Streptococci, which is a large one, and I am not going to bother you with classification. It is called streptococcus viridans because it has the faculty of producing a greenish colour on blood agar. The pneumococci can produce the same effect on blood agar since they are closely related to streptococcus viridans. Now this organism has a very low virulence, that is to say it is pathogenic. Therefore it can produce disease. But it does not produce disease as easily as the organisms of high virulence, e.g., the pneumococci. The strept viridans can be injected into the body of animal without producing very much effect, unless large doses are used.

We found patients who had this organism present in the blood, and of course we wished to know whether these organisms were fed into the blood from the infected valves, or whether there was a portal of entry such as alveolar abscess or tonsillar infection, which was quite probable.

ACTUAL EXPERIMENTS.

Now just to show you better what these organisms can do, let me run over a few experiments to illustrate it. Here we find an organism taken from such a case and injected into a rabbit in large quantities. Now you will be surprised to find how much they can take. One rabbit was injected with all the streptococci that grow in four vaccine bottles of broth. One vaccine bottle contains a little over 30 c.c. of broth. The bottles are centrifuged and the sediment which contains the organisms is put in a test-tube with normal saline, and after breaking up the particles very carefully, the emulsion is injected into the ear-vein of the rabbit. From here it is carried right into the heart and pumped all over the body. In this particular experiment the temperature went up to 104°, (normally 101°—102½°) then to 104.6°, and in 18 days the rabbit died. In the heart we found three large vegetations on the tricuspid valves. These vegetations closed up the valves' opening, and the rabbit died of obstruction to the circulation because the heart was literally blocked.

TONSILLAR INFECTION.

Now as we went on we found that some of these cases had a direct history of tonsilitis. We began to examine tonsils showing foci of infections. We found that we could isolate from these crypts pure cultures of streptococcus viridans, and by following out the same procedure, we were able in the very same way to produce endocarditis in rabbits.

INFECTION FROM ROOTS OF TEETH.

Then we began to look next for cases where there was no evidence of trouble in the tonsils, but the X-ray showed abscess formation on the roots of the teeth;—also in every case of pyorrhea alveolaris. We took the organisms from these sources, and went through the same procedure, and it was found to produce exactly the same result in the rabbits.

LESIONS FROM ORGANISM IN NORMAL MOUTH.

We went on and took up the situation in the normal mouth. We isolated pure cultures of *streptococcus viridans* from normal teeth and throats of students, and found in a great many instances that the organisms in normal mouths were capable of producing lesions in the animal, exactly similar to those cultures taken from abscesses. In all eleven strains were used. We took them in the same way, injecting thirty rabbits, and the results were simply astounding. We found that these organisms, living normally in perfectly healthy individuals, were also capable of producing disease. For example, two vaccine bottles of this culture were injected twice into the same rabbit and within a day after the last injection the rabbit died. On investigation by listening to the chest of this rabbit we could hear a definite diastolic murmur over the heart. On examination of the rabbit's thorax at autopsy, we found two vegetations on the tricuspid valves.

To make a long story short, we conclude that the organisms from the blood, and organisms from the crypts of tonsils in the case of chronic tonsilitis, from the alveolar abscesses, and from cases of pyorrhea alveolaris are pathogenic and produced lesions of a similar nature in the animal. We believe that the organisms living in the mouth are perfectly harmless so far as we know in a perfectly normal individual; but if the resisting power of the patient is below par, and they have the opportunity to get through into the blood stream, they have a chance to produce just as startling a condition as those of the others described above.

The significance of this point is that while the organisms are present at all times in the mouth, they are a constant menace to health. We should not be alarmed, however, because with reasonable care none of us are going to suffer from their presence, but the thing that strikes me is that it shows the great importance of preventive medicine and dentistry in preventing these organisms from obtaining an opportunity of getting through our wall of defence.

and getting into the blood stream. Once it is there it is in a fit place to be circulated throughout the body and produce lesions.

SELECTIVE POWER OF ORGANISMS.

It is peculiar how these organisms seem to localize in certain places. There is a great discussion in the realm of medicine at present in regard to the localization of streptococci. There is a difference of opinion among research men as to whether these organisms are able to pick special areas in the body for their special activity to the exclusion of others. That is to say, some claim that strains of streptococci isolated, for example, from the joints will, when injected into the blood stream of animals, produce joint infections.

In the same way the organisms isolated from a case of appendicitis and injected, will produce appendicitis.

We, here in Toronto, are working on that problem now. One day we isolated a streptococcus from a case of appendicitis. This organism was just like a great many other organisms isolated from different regions, but as a routine, we put them through three rabbits. We happened to be doing leucocyte counts on these rabbits every hour to find how the body responded to these organisms. We examined the rabbit every hour until late that night, and came back the next morning about 10.30. We heard a great noise in the cage, and found the animal was in a terrible convulsion. It had about a half dozen convulsions that day, and at night it died. On post-mortem examination, we found that the brain had many hemorrhages, which would account for these convulsions. The next day we took the same organism, injected it into another rabbit, and went through the same procedure. On the following day about the same time, that rabbit developed convulsions. We thought possibly the constant irritation caused by the blood-letting was the explanation of this peculiar phenomenon.

On the next rabbit we decided not to make the blood count. Well, that rabbit also developed convulsions. After it came out of the convulsions, the hind limbs were paralysed, and, on investigation we found that it had had a violent hemorrhage, which had shown itself in the spinal cord. All these results were checked up by three of us, as well as Prof. Mackenzie. We were out of rabbits so we had to give it up for a few days. When we got another stock of rabbits, we began again with the same organism. In the interval of two weeks, we decided that the organisms would not produce the

same lesion upon inoculation on account of frequent subculture, and our conjectures were correct in some respects.

We injected successfully, only one rabbit since then, and that rabbit had paralysis of the hind limbs.

MANNERS OF INFECTIONS.

You know organisms ordinarily do not produce disease while they are alive. Of course there are always exceptions to every rule. Non-pathogenic organisms, killed and injected in large quantities under proper directions, will produce lesions similar to those produced by pathogenic organisms. Now all this means that we have two ways in which organisms in the mouth may produce disease. First, simply by the poisons set free from the dead bacteria in dental and tonsillar abscesses. This in itself is a serious menace to health. The more important way is for these organisms to get into the blood from foci in the mouth and produce focal diseases such as rheumatism, endocarditis, or appendicitis. This is the reason for our plea for prophylactic dentistry.

DENTISTRY A SPECIALTY.

Now as to the relation between the two professions—really they are not two professions at all. Dentistry is fast becoming a special branch of medicine. Here we must be careful to make ourselves perfectly clear. It is not belittling dentistry to say that it is becoming a special branch of medicine. Take for example the nose and throat specialist. Does he think that he is stepping down when he decides to devote his whole energies to one particular branch of his profession—a branch necessarily much more restricted than general practice? Or take for example the Orthopedic surgeon. Does he feel that he is a less dignified or less useful man because he chooses to perfect himself in one line of effort? On the contrary his prestige grows, his usefulness is often enhanced, and he enjoys a reputation that is often the source of envy to his less fortunate brother. The care of the sick and the prevention of disease is the scope of the profession of medicine. That includes the care of the mouth, and if you like, of the teeth. With the marvellous growth of knowledge in this great science, due largely to the development of research in the laboratories and clinics, the sum total of our knowledge in this connection has grown to inconceivable magnitude. The inevitable result is that one man simply cannot master all there is to learn. It is physically as well as intellectually impossible. What could be a more logical outcome,

then, than the development of specialties, in one of which any man satisfactorily equipped with capacity and training, can reasonably expect to become a master? This division of labour is carried out in great detail. Take for example the science of pathology. Now, every medical graduate and every dentist is required to know the fundamental principles of pathology, and to be able to diagnose the typical lesions in the gross specimen, and in the section, but when operating upon a tumour of the breast, for example, the surgeon calls in the trained pathologist, and upon his decision rests the question of simple excision of the tumour, or radical removal with the glands of the axilla. But it becomes more complicated still when you remember that Pathology includes Bacteriology and Immunology—and in no other one branch of the healing art, has there been so much recent progress as in the last mentioned. Therefore, if the practitioner of medicine or surgery wishes to be absolutely sure of his diagnosis of syphilis—or diphtheria, or such conditions, he calls in the Bacteriologist or Immunologist, and the one so called really assumes the role of consultant.

So in your branch. The practice of your profession should always be in closest touch with the other branches of medicine. Co-operation, consultation and team work should ever be on your minds. It is only by working harmoniously in conjunction with your co-laborers that the treatment will be of the highest order, and the ideal results be attained.

But you ask—What about the patient? Whose is the patient? Who is going to take charge? All this talk is very well, but where does the patient come in? That is, indeed, a great question.

THE IDEAL RELATIONSHIP.

When the millenium comes—and may it be soon, I believe that question will be solved something after this way:—

The very ablest of the profession of medicine will be called the Internist, i.e., the man who treats diseases in general. The patient with endocarditis or appendicitis first applies to him for treatment. He discovers that this case has a focal infection about the tonsils or the teeth. If the former, he calls in the aid of the Laryngologist who removes the tonsils. The case, however, mark you, is in the hands of the internist. If there are alveolar abscesses, he calls in the dentist. The latter, in that ideal time, will be so well trained and equipped that his judgment should be the final one as

to the exact mode of treatment, for example—as to whether the abscesses should be drained through the root canal, with subsequent filling, or extraction, or otherwise. At the present time, comparatively few dentists, and very few physicians are in a position to give reliable opinions on that score. I feel that the dentist is the man who should decide, and it is for him to qualify himself to do it—and when he is qualified, he will soon be known.

Dr. Paul (to Hooley '17 who was rather unsuccessful in extracting a root)—“Never mind the forceps: take the elevator and save ten.”

Furlong '17—“Don’t you think Miss Milne is full of ideas.”

Kinzie '17—“Why yes, I think she must have had charge of a notion counter before coming to the college.”

Phil '18—“How is Mike this morning?”

Reid '18—“Oh! he’s wineing all the time.”

Phil '18—“Maybe the poor chap is aleing.”

Reid '18—“Well probably he is. I feel rummy myself to-day.”

Sheldon '18 (visiting Gilbert)—“Well, I must be off.”

Gilbert '18—“Sure, I noticed that long ago.”

Scotty '18—“Going to the military dance to-morrow night?”

Fiske '18—“Who’s going to be there?”

Scotty—“Oh, all the big guns.”

We certainly are disappointed. Doc. Bright’s car makes just as much noise as ever after him going to such expense in taking off the brass band.

Kauffman '17—“Say, Robb, you surely do look tired. Where have you been exercising?”

Robb '17—“Well I went over to the mutes’ dance and swung dumb bells all the evening.”

Ross '18—“Say, Stout, why aren’t you watching the game?”

Roos '18—I’m trying to intercept a forward lass.

Fixed Bridgework

A. A. STEWART, D.D.S., TORONTO, PROFESSOR CROWN AND BRIDGE DEPARTMENT; ROYAL COLLEGE OF DENTAL SURGEONS, OF ONTARIO.

FOR several years past fixed bridgework has been the subject of much adverse criticism at the hands of both dental and medical practitioners. It has been criticized from all standpoints, from that of mechanics, from that of its effect on the abutments, and from the sanitary point of view. Much thought has been given and work done by the dental profession to produce something that would overcome all these objections, but unfortunately the greatest amount of this thought and experimentation has been done along the line of removable bridgework, and not sufficient to the improvement of the principles of fixed bridgework itself.

The result of this has been that now we have an abundance of methods and attachments for removable bridgework and a tendency to condemn all bridgework of the fixed variety. In the opinion of the writer there is still a large field for both types, and while the advent of the removable bridge has added greatly to the scope of the practice of bridgework, we should not be so enthusiastic over it that we discard the fixed bridge entirely. Some of the great essentials of bridgework which we have been striving to attain are these:

1. A bridge which does not irritate the soft tissues.
2. A bridge so constructed and made of such materials that it will not become coated with thickened mucous in those parts where it cannot be thoroughly cleansed mechanically.
3. A bridge which restores as nearly as possible the natural condition, both labially and lingually.
4. A bridge which presents as few angles as possible for the lodgement of food, and which presents as small an uncleanable area as possible.

In all our work we have apparently overlooked the fact that a highly glazed porcelain presents a surface that is less irritating to the tissues than any other, and also the fact that highly glazed porcelain does not become coated in any mouth, no matter how in-

differently that mouth may be cared for. We have heretofore placed gold in contact with the soft tissues, although we have seen how difficult it has been to keep the gold bright and clean. We have tried to be too aesthetic, hiding all gold and having nothing but porcelain showing in the mouth. The result has been disastrous in many mouths. We have had a bridge that could not be cleansed, a bridge which irritated the soft tissues and one which has very nearly placed bridgework in the discard.

It is not the purpose here to go into the discussion of abutment pieces for bridgework, for I take it that the question of abutments has been pretty thoroughly settled, and that they must be left to the judgment of the individual in each case. I propose only to discuss here the intermediate part of the bridge. There will be no new principles involved, only a change in the method of procedure, and that change is simply the reversal of the present method of putting gold in contact, or in close proximity, to the soft tissues.

The technique of making such a bridge for a case when we have lost a bicuspid and molar, either upper or lower, with a bite that is normal (not too close a bite), is very simple and takes but very little more time, although possibly requires more careful attention to technique than any other.

Select for your dummy any tooth that you desire, a detachable crown, an Ash tube tooth, a diatoric tooth or a long pin facing. Ordinarily, a detachable crown serves very nicely. Select crowns that fit the case approximately, but noting carefully that the crowns are rather shorter than you would ordinarily select. The crowns should be such that at this time you do not require any grinding whatever and just reach from the occlusal surface of the opposing teeth to the soft tissue, or better still, just a little short of the soft tissue. If you are using a crown of high fusing porcelain, bake high fusing body of approximately the same shade as the crown, over the gingival end of the crown.

No care need be given here as to the accurate shaping of the porcelain to have it fit the model, but care must be taken that no porcelain fills the hole in the crown which ordinarily receives the dowel. After adding your porcelain bake just a little more than a biscuit bake; we then have a crown with a piece of porcelain baked on the gingival and with the space in the centre as in Figure No. 1.



Take your porcelain crowns so baked and place them in position on your model, grinding away sufficient of the porcelain that you have added so that the porcelain will rest on the soft tissue, but so that it will cover as small a portion of the soft tissue as possible, and thus leave as small an uncleansable area as you can without interfering with the aesthetic effect.

This having been done add a thin coating of enamel body and bake to a high glaze. Now proceed with the preparation of your

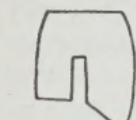


Fig. 2

occlusal surface. Grind sufficient of the porcelain away on the occlusal so that you will have sufficient thickness of gold when it is replaced with gold bands to give necessary strength to the bridge. In nearly every case you will have ground into the cavity in the centre of the crown. Your porcelain will then have the appearance, looking at it from a mesial aspect, of Figure No. 2.

To get a larger area of gold on the mesial and distal surfaces bevel your porcelain in those surfaces so that your gold, when made up, will project over your porcelain on those surfaces. Having your porcelain prepared, burnish or swedge a piece of 24k gold, 35 gauge, over the occlusal surface and trim to fit. Pierce your gold over the hole in the porcelain and insert to the bottom of the opening a piece of 14-gauge I. P. wire; wax and remove and fasten with solder. Now replace on porcelain and reburnish, assemble all your dummies and build up the occlusal surface with wax, being particularly careful to add sufficient wax at the labial so that the porcelain will be protected from strain when the piece is finished; each dummy will then have the appearance of Figure No. 3.



Fig. 3

When the occlusal surfaces have been carefully carved, cast in a hard gold of high karat, not less than 22.



Fig. 4



Fig. 5

Finished Bridge without Porcelain.

Finished Bridge with Porcelain cemented in position.

Now assemble all your parts, remove the porcelain by cutting away the model sufficiently to allow of their removal, invest and solder. The solder should be confined as much as possible to the

mesial and distal surfaces so that the bridge will have the appearance and the feeling to the patient of individual crowns. Polish and set the porcelain with good crown and bridge cement and allow to harden.

You have now a bridge which appears as Figures Nos. 4 and 5.

The particular advantages of this bridge over the ordinary types of fixed bridges are these:



Fig. 6.

1. A highly glazed porcelain is in contact with the soft tissues, and this does not become coated and is tolerated by the tissue.

2. The uncleanable area in the bridge is reduced to a minimum.

3. It is much more comfortable to the patient, both as to the feeling of being individual crowns and the fact that there is no surface for the lodgement of food.

In cases where the bite is very close the same principle may be adopted by using the long pin facing and baking porcelain at the gingival. Figure 6 gives you a cross section of the finished dummy.

After the porcelain is added and the tooth is properly ground and glazed, back in the ordinary way and built up with wax to the shape required, remove the wax and backing, insert graphite points in the openings made by the pins and cast.



Fig. 7.

The same idea can be used in anterior cases, but the ordinary porcelain crown will nearly always suffice. Figure 7 shows a cross section of one of these crowns baked, ground, and Figure 8 the finished dummy.

The work involved on this method is not difficult, nor does it involve as much time as one imagines. The results obtained are so satisfactory that it more than compensates for any additional time and effort.

—*Oral Health.*



Fig. 8.

SOCIAL UPLIFT.

“I’m asking a raise,” said my pretty stenog,

“For I’m planning a regular spree.”

“Very well,” was my answer, “I’m never a hog,

And I raised her—right up on my knee.

Use of Elevators in Exodontia*

E. W. PAUL, D.D.S., TORONTO, ONT.

Professor of Anesthesia and Exodontia, R.C.D.S., Toronto.

MR. CHAIRMAN, Ladies and Gentlemen,—My paper, or what may more properly be called my talk, possesses at least one virtue, and that is, that it is very short. No doubt it is unnecessary to explain what is meant by elevators, although I have met some dentists who did not know what I meant by that term. All of you have used an elevator at some time, even if you did not wish to call it by that name, in the form of an excavator or a scaler, or some similar instrument. An elevator consists of a handle and a blade made up in a great many different forms, many of which are of very little use, except for isolated cases. An elevator acts on the principle of a lever or a wedge or pryer, with which you pry the roots or teeth out of their sockets, usually by using the adjoining tooth as a fulcrum. In the absence of an adjoining tooth, you have to use your finger, or else the margin of the alveolar process surrounding the root.

ADVANTAGES OF ELEVATORS.

In the case of badly broken-down teeth, roots that are badly broken down below the gum, and in the case of hidden roots, if a forceps were used it would mean considerable fracture of the alveolar process, and more or less laceration of the gum. By the skilful use of an elevator these can be avoided. Of those cases I am free to admit there are a number I could not possibly extract without the use of elevators. In the case of impacted teeth, suppressed teeth, or irregular teeth, it is sometimes impossible to apply a forceps or apply force in the proper direction in order to remove the tooth from the socket. In such a case an elevator can be used to advantage. Another advantage is that patients dread the use of an elevator much less than the use of a forceps. I might say that elevators seem to be indicated more in the lower jaw or mandible, especially in the case of badly broken-down first molars of children, or in impacted lower wisdom teeth, and in the case of a badly broken-

* Read before Ontario Dental Society, Toronto, May, 1916.

down bicuspid. I seldom—possibly not so seldom, but in comparison with the lower jaw, I seldom—use the elevator in the upper jaw.

There are many different forms of elevators. Some are too large and too long; you are too far away from your work. Some have handles with sharp or serrated edges, which either hurt your hand when grasping tightly, or injure the corner of your patient's mouth when using. The points of the beaks of some elevators are too dull and too thick, and then others, having wooden handles, do not admit of sterilizing by boiling.

The essentials of an ideal elevator are:

1. It should be made of metal, so that it can be sterilized by boiling. It is a great satisfaction, after using an instrument, to be able to throw it in the sterilizer and have it boiled.
2. The point or edge of the beak should be sharp and thin—practically a knife edge—so that it will cut through the gum, and, if necessary, into the alveolar process.
3. The point of the beak should be in line with the handle.
4. The form of the handle should be such that it will not turn in your hand when considerable force is applied.

At the present time, no elevators that I know of fulfil all these requirements. Recently I designed a pair of elevators, which were made by a tool manufacturer, and although very crude in their make-up, have served to demonstrate that the idea is practical, especially if the elevators were made by a competent instrument-maker, with some improvements he might suggest.

METHOD OF USING ELEVATORS.

When operating on the left side of the mouth, especially in the mandible, the operator stands well in front of the patient. With the first finger, the cheek is held out of the way, and with the second finger, the tongue is kept out of the way, and with the thumb, you support the lower jaw. You decide the direction you wish to apply your force, and the tooth you wish to use as a fulcrum, and use either the right or left hand elevator, as indicated. In case it is the roots of the lower first molar which have to be extracted, and the second molar is to be used as the fulcrum, you use the right-hand elevator. By inserting the thin edge of the beak between the gum and the root in the V-shaped space, you press your elevator down until you have reached fairly sound tooth tissue, and then apply your force by prying upwards and forwards, and the root

will usually be removed. If you find the root is breaking off, then insert your elevator a little deeper, which will mean that you have to cut into the process, and that is where the advantage of the sharp and thin elevator is seen. After you have extracted the distal root, you can use the left elevator, inserting it between the second bicuspid and the mesial root, and applying your force upwards and backwards. Another method is, where one root is extracted, place the point of the elevator down the socket, cut through the thin plate of bone which separates the roots, securing a hold in the side of the remaining root, and lift it out of its socket. Where there is no adjoining tooth to use as a fulcrum, as I said before, you must use your finger, from which you can supply considerable force, or insert the beak of your elevator between the gum and the root until you reach the process, and by prying against the edge of the process, the root can usually be removed.

In extracting lower third molars, I usually use a straight wedge-shaped elevator, placing it between the second molar and the wisdom tooth, and by simply turning and prying distally, the tooth is lifted out of its socket. All the time we protect the throat and support the fulcrum tooth with the point of the second finger.

When operating on the right-hand side of the patient, you stand behind and well above your patient. With the first finger you keep the cheek out of the way, and with the thumb you hold the tongue out of the way, and with the rest of the hand you support the mandible, protecting the throat and steadyng the fulcrum tooth with the thumb. Do not be afraid to take a firm hold of your elevator, and get close to your field of operation.

In extracting upper roots or lower anterior roots, the beak of the elevator is placed between the gum and the root on either the labial or the lingual surface, and by supporting your thumb on the adjacent gum or teeth, the roots are lifted out without, in most cases, the laceration of any gum tissue or fracture of the process.

In the case of fractured upper third molars, or where they have been attempted with forceps, and will no longer take any grip of the root, often by inserting an elevator between the second molar and the wisdom tooth and applying your force distally, the root will at least be loosened, and sometimes removed.

There are a few precautions to be observed in the use of elevators. Avoid letting your instrument slip, as these elevators are more or less sharp, and would injure or lacerate the tissues considerably. Then avoid using a porcelain crown, or a great many

gold crowns often having a weak foundation, teeth whose crowns are largely fillings, or loose teeth, as fulcrums against which to apply your force. In cases where this seems necessary, insert the point of your elevator as deeply down on the root as possible, so as to bring the strain below the crown or weakened portion of the tooth.—*Dominion Dental Journal*.



Some Cases in Dental Surgery

TREATED AT THE R.C.D.S.

(Continued from last month.)

Case No. 3.—CHRONIC ALVEOLAR ABSCESS.

Surgeon—A. E. Webster, D.D.S., M.D.

CAUSE.—Punctured Root.

HISTORY.—On November 13, J. Trace presented upper left lateral incisor with abscess over the root on the labial surface almost ready to break. The patient had suffered no pain or inconvenience but had presented because the inlay had been lost out of the tooth. Mr. Gilbert, the operator, on examination noticed the abscess and an X-ray picture was taken with broach inserted which showed the location of the puncture (Fig. 1).

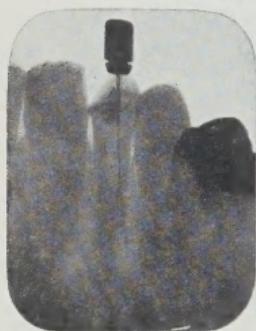


Fig. 1.

Showing probe passed through
puncture in root.

TREATMENT.—*1st Sitting.*—On November 20, the abscess cavity was washed out, and a local anesthetic injected. On cutting through the labial plate of bone the

puncture was easily located. A cavity was prepared around the puncture with a fissure bur in the dental engine. A probe was placed in the root canal proper and a copper-amalgam filling was inserted in the puncture, and the abscess cavity packed with iodoform gauze. On account of subsequent treatment being necessary the mucous membrane was not sutured.

Second Sitting.—The gauze was removed and the field of operation was disinfected with alcohol and iodine. The amalgam filling was then smoothed and polished. Another X-ray was taken showing the canal well opened (Fig. 2). As there was still some soreness in the canal a dressing of campho-



Fig. 2.

Showing puncture filled and
measurement wire in canal.

phenique was sealed in, as the edges of the mucous membrane were soft and flabby no suture was used to close the abscess cavity.

Third Sitting.—The soreness having disappeared the root canal was filled and a gold inlay with a post placed in the tooth.

PROGNOSIS.—The soreness at the end of the root has disappeared and it is expected that the bone will soon enclose the cavity.

The following is a brief report of a very interesting case treated at the Western Hospital.—*Editor.*

Case No. 4.—SQUAMOUS-CELLED CARCINOMA.

Surgeon—Fulton Risdon, M.B., D.D.S.

Patient—Male, age 47; occupation, packer; birthplace, Canada.

Complaint—Constant pain in region of upper jaw.

Duration—Two months.

Onset—Gradual, but increasing pain.

History.—(a) *Present Illness.* For over two months the pain has been constant but not severe as the patient could sleep assisted by aspirin as a nerve depressor. No history of discharge from the nose or any obstruction. Complains now of slight swelling in molar region of right upper jaw.

(b) *Past Illnesses.*—Of negative value except denies venereal disease.

(c) *Family History.*—Of negative value except one still-born child and only two pregnancies in twenty years.

General Examination—

Cardio-vascular system—negative.

Respiratory system—negative

Genito-urinary system—negative.

Nervous system—negative.

Digestive system—negative.

Regional Examination—Over the upper maxillary bone a swelling about the size of a quarter is to be seen, has a peculiar red appearance, oedematous, smooth in outline and semifluctuant. Some glands palpable and hard.

DIAGNOSIS—Squamous celled carcinoma or cancer.

Reasons for above diagnosis—

- (1) Constant pain—not always present but of value.
- (2) Age of patient.
- (3) Not likely syphilitic—for many reasons—(no Wasserman done).

(4) Section taken from tissue, showed cancer.

(5) Glands palpable and hard.

Differential Diagnosis—

(1) Not likely benign as growth rapid and painful and glands involved.

(2) Not likely Sarcoma—as age and appearance against that diagnosis.

(3) Not likely syphilitic as married young and gives clear history.

Prognosis—Grave and very guarded as to chance for cure.

Treatment—Removed the upper jaw, including the entire superior maxillary bone and resected the glands of the right side of the neck and tied the external Cartoid artery to decrease the blood supply to growth.

Patient is being treated by Radium through kindness of Dr. H. B. Aiken and Dr. Arnold Clarkson; also given two (c.c.) of Cuprase twice a week hypodermically.

White '18—But couldn't you learn to love me.

Fair One—I don't think I could, Jim.

White '18 (standing erect and reaching for his hat)—"It is as I feared, you are too old to learn."

Clark '18—Do you still read Tennyson sometimes?

Crowley '18—No; who wrote it?

Long '18—I can't understand why you should be feverish. It was only last Saturday that I injected 8 different anti-toxin into you.

Patient (recovering)—Perhaps, Doc, what I need now is an anti-antitoxin.

Here lies Bill, the Kaiser,
Leaves his people sad Budweiser.

Robb '17 (looking into a haberdashery window).

White '17—What are you going to purchase, shirt or pyjamas?

Robb '17—Neither; the only thing that fits me ready made is a handkerchief.

C.A.D.C.

LETTER FROM PTE. C. T. MOYLE TO MEMBERS OF
CLASS '18.

38 Bouverie Rd.,
Folkestone, Kent.
Nov. 10, '16.

Dear President and Fellow Students:

I have often thought of dropping you a line and letting you know how we are getting along, but as perhaps you know one is inclined to be busy in this war.

No doubt you will be interested to know where some of the fellows are. We are distributed around at the different camps pretty well. Alston is at Dibgate, Parker, Humphreys and Legate ('17) at Sandling, Sirrs at Bramshott, while Murray, McKay and myself are here at St. Martin's Plains.

We are billeted, as perhaps you may have heard; in a house in Folkestone and march out to the Plains every morning, a distance of about three miles.

All the fellows are looking fine and some of us are getting quite fat, so things seem to agree with us. None of us have stripes except Serg. Parker and Acting-Serg. Sirrs.

The work over here is certainly a great education for a dental student and I don't think we will ever forget some of the mouths we have seen over here.

MacKay, Murray and I are sleeping out in a tent in the back yard of our billets, and we often pass the time away talking about the R.C.D.S.

I am despatch rider for the corps at present and of course I am enjoying the work.

We are having lots of rain nearly every day but of course that keeps the dust down.

Well, I suppose you are all would-be docs. by this time and are quite busy these days in the Infirmary.

One and all of us will be pleased to have a line from any of the fellows any time and wishing you every success in your final year.
I remain,

Yours very respectfully,
C. T. MOYLE, No. 337872.

The Freshmen

Roy W. STEVENSON, '20.

We are extremely sorry to learn that Mr. Stevenson has been unable to continue his course on account of ill-health.—EDITOR.

We come from miles on either hand
(Not to play in plasticine).
From the sea coast of Newfoundland,
From the Mississippi's stream,
From the mining fields of Scotia,
From the plains of 'bundant green,
And from a thousand "little joints"
That no one has ever seen.

Some of us are Scotch "whatever",
And some others Irish "shure".
And there's Moses Zacks forever;
But where's Frenchy? Eh, Bonjour!
And Miller from the western States,
And Miller from Erie's shore,
And nigh a hundred other names
That I never heard before.

But there's one large fleshy person,
I just forget his name,
It's "Fat" or "Long" or "Something",
Yes! You get me just the same.
He's a great big hearty fellow
With a soul as big as his frame,
And a smile that lasts forever
If you honour "Tiny's" name.

Here we are a wee bit "seedy"
And a trifle countrified;
But take the whole lot together
We managed to get inside.

And before the year is over
You will glance at us with pride,
And smiling remark to someone
"They're Dents, Dents dignified".

Poor Sophs! They put up the eats,
We ate all we wished,—and more;
Now the sophs and we are such friends
As we never were before.
So it is throughout all the years,
That enter our college door,
The best of friendship does exist
Right now and forever more.

A DAY AT THE DENTIST'S.

I went to the dentist's to have a tooth filled,
He sorted his tools with an ardor that thrilled,
He opened my mouth till I heard my jaw crack,
And bored a large hole down the small of my back.
He bored out my skull and he bored out my jaw;
He put in a funnel in search of a flaw,
He put in a blast and he put in a sump;
He mined and projected with clatter and thump.
He drilled into fragments my aching backbone,
And hoisted it out, never heeding my groan,
He worked at the hole till it grew to a cave,
A chasm, a canyon. With eagerness grave
He said; "Now I'll fill it. And mixed up with care
Some acid and pepper and mortar and hair,
He cooled off my mouth with tobacco, and then
He filled up that pit with the strength of ten men.
He pounded and prodded, he beat and he tamped,
He mauled and he hammered, he slugged and he stamped,
Till the hole he had dug to the foot of my feet
Was filled with a carload of solid concrete.
"It is finished," he said, as he rose from my knees
And got down from my collarbone. "Two Dollars, please,"
Which I paid with a will as I put on my lid,
For I don't think 'twas much for the work that he did.

Dentistry and Medicine

G. M. SINGLETON, '17.

DENTISTRY'S value, like everything else, is truly only so much as is the measure of its service to humanity. It is hardly conceivable that it could be of as much service as medicine, unless indeed it were to grow sufficiently to make medicine an adjunct.

An occasionally apparent effort, therefore, on the part of some to compare it to medicine is merely a misdirected effort to elevate dentistry, arising primarily from a misconception of what dentistry really is, essentially and potentially. And while dentistry like everything else is what is put in it, still as the two professions stand to-day they are separate in the minds of men, and comparison will not amalgamate or aid either one of them.

However, it might comfort the well-meaning comparers to realize that they can hope and work for the broadening inclusion of such science and art as now happens to be identified with medicine. But to be well-meaning and hopeful is not enough—we must work to broaden our field, thus bringing dentistry up in the ranks of sciences and arts. And this brings me to the point I am desirous of making.

To-day dentistry stands peculiarly alone, and well on its own feet, and the psychological wave now started for the purposes of absorbing dentistry into medicine should be firmly met and stopped before it overcomes the better judgment of dentists, who when the time comes may or may not be permitted to have some say in the matter. To my mind, the dentist has found his niche, has become a strong type, being more and more respectfully recognized by the public. And the truth of the matter, it seems to me, is that medicine is recognizing this fact too—the fact in a word, that her despised child dentistry is growing into such respectable and strong claims to usefulness and individuality that it were high time she be absorbed and lost in medicine. Something akin to Austria's effort, a few years ago, at absorption of little Servia.

Perhaps I may be strong—this medical move may be benevolent.

If this four or five year courses conferring the M.D. degree gave the same or more attention to the subjects peculiarly dental and so ran in accord with the principles of vocational education, then it would turn out better dentists or doctors, or whatever they might be called, since there is usually but little in a name.

“H. I. M. WILLIAM.”

(The following poem was found in the Kaiser's personal wastepaper basket).

Oh me!

Oh My!!

And likewise I!!!

Sit still my curls, while I orate
Me, I, Myself, The Throne, The State.

I am the earth, the moon, the sun
All rolled in one!

Both hemispheres am I,
Oh My!

If there were three, The Three
I'd be.

I am the Dipper, Night and Day,
The North and Southern Poles, the Milky Way.
I am they that walk or fly on wing,
Or swim or creep. . . . I'm every thing.

It makes me tremble like the aspen tree,
To think I'm Me!

And blink like stars up in the sky
To think I'm I—

And shrink in terror like a frightened elf
To realize that I'm Myself.

Ye blithering slaves beneath my iron heel,
What know ye of the things I feel?
Didst ever wake at dead of night,
And stand in awe of thine own might?

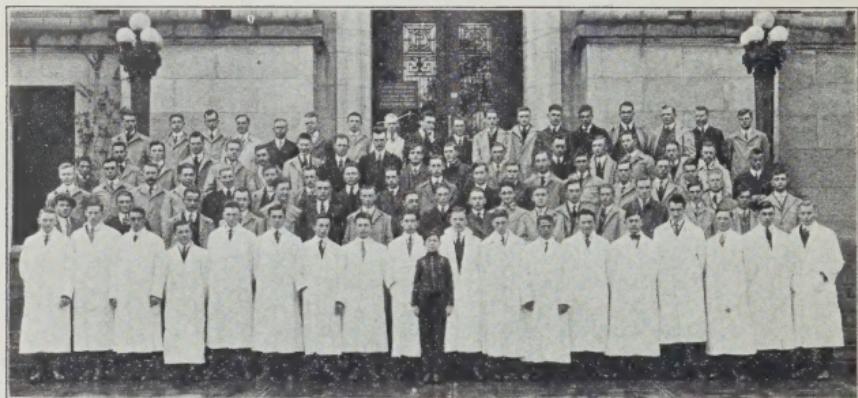
It took six days to make the land and sea,
But centuries were passed in making Me.
The universe? an easy task! but I—
Oh My!!!

JOHN KENDRICK BANGS.

Written of the Kaiser 20 years ago.

Freshmen Enlist in C.A.D.C.

MONDAY morning, December 18th, marked an eventful epoch in the history of Class '20, when the class unanimously decided to join the C.A.D.C. in a body. The class took this action immediately upon learning of the need for sergeants in the Dental Corps. So great was the need that the Assistant-Director of Dental Services contemplated opening a military dental school for the training of assistants for dental surgeons and laboratory men for the C.A.D.C. By the united action of the freshmen, the Government will be relieved of the necessity of opening a school for the training of dental laboratory assistants.



FRESHMAN CLASS, 1916-17, R.C.D.S.

Who have offered themselves in a body for service in the C.A.D.C.

On Monday afternoon the Class marched to the Armouries to be attested. Out of the 100 members about 75 were successful in passing the medical examiner. The remainder of the Class, who were physically unfit, will proceed with their course in the ordinary way—the Class being divided into two halves. Those who are physically unfit will be transferred to the Junior laboratory and receive the ordinary Freshman course, while the overseas members will be given special tuition in Prosthetic dentistry in order that they may become proficient in this branch of dentistry before joining the Dental Corps about the end of January. Their Christ-

mas vacation has been shortened and they will return to the College about January 3rd.

Since the beginning of the Fall term the Dental College has been under some criticism from other faculties of the University on account of the freshmen enrolment being normal, while the enrolment in other faculties was exceedingly small. By their noble stand, the freshmen have turned this criticism into praise and have also turned the Dental College into a recognized military training school.

The freshmen will fill the immediate requirements of the C.A.D.C., but another draft of some 120 sergeants will be needed to go overseas about the first of July. A new course will be started on Frebruary 1st for the training of these additional men. This class is open to all matriculants. It is expected that a number of University College men will avail themselves of the opportunity of proceeding overseas as sergeants and will transfer to dentistry about February 1st. It is expected that they will receive credit for their year in University College, as well as receiving their first year in dentistry if they qualify. President Falconer and the Bursar are heartily in favour of this plan. It is also anticipated that many High School students upon recommendation of their principal will be granted their matriculation for the purpose of enrolment in this special class, it being unnecessary to be over sixteen years of age to enter. These will also receive their first year in dentistry if they qualify.

Dentistry is being recognized to be of utmost value in the preservation of the health of the men at the front, and on account of the C.A.D.C., authorities finding it almost impossible to adequately cope with the dental conditions of Canadian troops, the demand for more dental surgeons and laboratory assistants is being made. We are proud that the undergraduates of the College are responding so readily.

Sweet Thing (at football game)—“Oh, look at those poor boys rolling on the ground. How will they ever get clean again?”

Freshie (extra green)—Why, that's what the scrub team is for.

Halloran '18—“Great production to-night. Want to come? All the motormen and conductors are in it.”

Miss Milne '18—“What is it called?”

Pete—“Carmen.”

THE HYA YAKA

A JOURNAL PUBLISHED MONTHLY DURING THE COLLEGE YEAR
BY THE STUDENTS OF THE ROYAL COLLEGE OF
DENTAL SURGEONS OF ONTARIO

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No 3.

Editorials

FRESHMAN ENLISTMENT.

THE unanimous decision of the freshman class to offer themselves for service in the Canadian Army Dental Corps cannot pass without comment. Their action caused some wild speculation. It was thought that those who passed the medical examination would soon regret the step they had taken and merely wished to obtain credit for their year. Such is not the case. Many of those rejected as physically unfit are sorely disappointed at the impossibility of seeing active service. The demands of the C.A.D.C. have been so insistent, however, and the number of dentists in Canada have been so depleted that these men will be greatly needed at home.

The freshmen have performed a service both to the government and to the dental profession, which cannot be overestimated. The government has been relieved the burden of recruiting men to train as sergeants and has been spared the expense of establishing a dental military training school for their tuition, as the College is now performing that function. The profession has been saved the necessity of acceding to demands of men recruited from the streets, who when they returned would clamour for admission into dental colleges without proper qualification. The profession has been saved, too, the problem of the illegal practitioner, who,

when brought to task would state that he had rendered dental services to men in the army and was still competent to render dental services. As the freshmen are qualified men the possibility of these unfortunate circumstances has been relieved. Their action is to be heartily commended.

INFIRMARY EQUIPMENT

Modern methods are to make themselves felt in the infirmary. It is the aim of the board to make each student's chair as near like a modern dental office as possible, in order that each man may be in a position to render the best possible service to his infirmary patients. Light is one of the greatest factors in the execution of the best work and each student's office will be equipped with electric light in order that work may proceed on dull days without eye strain. Compressed air is to be installed for use at every chair to train each man in its use and in order that he may get a blast of air of greater force in drying tooth tissue. Electric engines are to be a reality also. These will demand less labour on the part of the student with a quicker and better cavity preparation, etc. The present instrument case is to be superseded by a modern dental cabinet. No longer will the student be operating from a suit case. More supplies will be kept in the cabinet and much valuable time saved in waiting at the office for towels, cements, rubber dams, etc. Each cabinet is to have the instruments arranged the same and in this way a demonstrator will know exactly where to find an instrument when needed. A dental nurse is now on the infirmary floor and the assistance given by her enables the student not only to work more quickly but also gives him an idea of the duties of an assistant and will get a better idea of how to train one. after graduation. The importance of ascepsis, especially in root canal work has for some time been recognized. Hereafter each student must provide himself with a modern double compartment sterilizer in which he may sterilize cotton linen wipes, etc., may be dry sterilized as well as the regular wet sterilization of instruments. Some criticism has been aimed at the dental profession on account of the apparent lack of antiseptic precautions in dental operations, but the future R.C.D.S. graduate will not fall under this category if the teaching and instruction received during undergraduate days are fully carried out in practice. The entire revolution is surely a commendable one.

Personals

Dr. J. Allan has been appointed demonstrator in the infirmary to fill the vacancy created by Dr. Coveyduc's departure. Unfortunately Dr. Allan will be with us only until Christmas as he intends leaving for New York where he will be associated with Dr. J. Lowe Young, the noted Orthodontia specialist. We wish him every success.

Dr. Cummer has been lecturing and giving clinics at the National State Dental Society at Dayton, Ohio, recently.

We are extremely sorry to learn that Roy W. Stevenson '20 has been forced to abandon his course and return home. Being threatened with tuberculosis he has been advised to seek an out-of-door occupation.

J. C. Barker '17 has recently returned from the front to complete his course.

Capt. F. Hinds was a recent visitor at the College.

Deepest sympathy is extended H. C. Roos '18 in his recent bereavement.

Among the recent visitors to the college was Capt. H. A. Stewart of the C.A.D.C.

Dr. Milton Hagey is in charge of a dental practice in Kingston. "Slim" is doing well and we wish him all success.

Capt. Harry Alford '15 payed a visit to his Alma Mater.

Dr. Norman Liberty was renewing acquaintances at the college. "Norm" still possesses that everlasting smile that was with him all through his college career.

Roger McDonald who started with class '18 payed a visit to the college. "Mac" has joined the C.A.D.C.

Informal Dance

A most delightful time was given the students on Friday evening, November 24, by the at-home committee at the second informal dance for the season. As usual, the Hall was prettily decorated with garnet and blue bunting. Chinese lanterns were suspended from the ceiling, while numerous pennants adorned the walls. The grinning moon was much in evidence as it blazed forth in all its grandeur. The decorations gave a decidedly artistic effect to the surroundings and were the subject of much favourable comment from the many fair ones of the assemblage.

Filby's orchestra provided the music for the occasion to the greatest satisfaction of all.

There was a splendid representation of the student body who gladly welcomed the opportunity to forget their worries to indulge in the frivolous pastime.

Dr. Risdon was present to represent the Faculty. Considerable comment was passed upon the beauty of the fair sex present. This factor no doubt had considerable to do with the success of the evening. The dance broke up about 12 o'clock, everybody having spent a most enjoyable time.

Freshman Dance

On Wednesday evening, December 6, a very well arranged dance was held at Aura-Lee by class '20. The other years were well represented including a few seniors who doubtlessly contributed to its success. The music was very good and the many encores were much appreciated by the "Frosh" who were being initiated into the new steps of this age.

We congratulate them on this successful event, and hope that at their next dance they will all have the privilege of inviting a friend in order that more may have the privilege of attending.

C.O.T.C.

Since last issue of the HYA YAKA the work of training the Dental Platoon has been carried on very satisfactorily. The attendance has been very irregular however for which the Seniors are chiefly to blame.

It is all very well for a man to say that he has already drilled two years and knows all he wants to know, but perhaps he does not want to know very much, and when it comes to his getting an appointment in the Dental Corps he may be called upon to take charge of a body of men, when his lack of knowledge will be displayed.

Now, those men who signed the Service Roll must become efficient and to do so must attend regularly to drill. The Government gives the C.O.T.C. five dollars for every man who passes the efficiency examination during his absence, and if he fails to obtain a pass upon the paper or measure up to the standard, the C.O.T.C. exacts the five dollars from him personally, which, if not paid directly, can be collected through the Court of Law.

Apart from the actual military knowledge gained it is most beneficial from the standpoint of health, to get out and drill. At the present time we are living too much indoors.

On Thursday, December 7, Dr. Willmott, Lieut. Commanding the dental Platoon was on parade for the first time since his illness and was very well pleased with the manner in which the work had been carried on. After a short speech he put the platoon through its paces in Company Drill for a short time and then turned the parade over to Mr. Broom who gave some instruction in Arms Manual.

Recently the Officer in charge spoke to all the men before dismissal and called attention to the fact that there were a number of men drilling in civilian clothes, and also remarked upon the tendency of the men to become slovenly in their work. It is necessary that all men be in uniform and pay particular attention to neatness. It is expected that a Field day will soon be arranged when a full turn-out is requested.

J. C. W. BROOM.

What the Students are doing at the Front

CAPT. CHAS. BISHOP.

On Saturday November the twenty-fifth the students of the R.C.D.S. gathered in the assembly hall at 11.45 to hear Captain Chas. Bishop, National Secretary of the Y.M.C.A. who has recently returned from the front.

This is the first of a series of meetings to be held during the session and it is respectfully suggested and advised that each and every student take advantage of these opportunities of hearing these speakers of high intellectual attainments who will be with us from time to time.

A little enthusiasm was worked up among the students by the use of song sheets containing the latest popular airs and upon the arrival of Capt. Bishop in company with Dr. Seccombe, the air was rent by three lusty cheers and a tiger of welcome.

After singing with a good swing and in excellent time that old familiar hymn "Onward Christian Soldiers" the president of the senior year and representative of the local Y.M.C.A., Mr. Mullett, introduced in a few well chosen words, the speaker.

Capt. Bishop expressed his pleasure of the hearty reception given him and spoke of the great work that the students in khaki were doing on the firing-line. He stated that over fifty per cent. of the entire student registration throughout Canada were already in khaki, and that none were better fitted for the hardships and privations of active service than those who had learned the powers of strength and self control by participating in the different sports during their High School and College courses.

He gave a vivid description of the great work that the Y.M.C.A. is doing on the firing line and remarked that this institution is doing inestimable work in providing comforts and social recreation for the men, and in several cases it has become part of the student soldier's work to render first aid to his wounded comrades.

In conclusion he emphasized the Y.M.C.A.'s need of sympathy and support in their undertaking and urged the student body to do all in their power to assist this association in furthering its commendable work.

Students' Parliament

THE first meeting of the Students' Parliament for the season was held on Monday, December 18th at 8 o'clock in the Assembly Hall. Mr. H. W. Reid, president, was in the chair. After calling the meeting to order he requested the Dental Orchestra, which was present, to render a number. This was heartily encored. The minutes of the Cabinet meeting, held on December 5th, were then read and the budget recommended by the Cabinet was discussed clause by clause. The following was finally adopted:—

Basketball.....	\$25.00
"At-Home" Committee.....	200.00
Royal Dental Society.....	75.00
HYA YAKA.....	250.00
Interfaculty hockey.....	200.00
Orchestra.....	50.00
Quartette.....	15.00
Y.M.C A	35.00
Loan to Dental Hockey Club.....	400.00

	\$1 250.00

Mr. Reid announced that owing to the peculiar circumstances in which the freshmen found themselves on account of the noble stand they had taken to meet the demand for sergeants in the C.A.D.C., the debate between Juniors and Freshmen would have to be awarded to the Juniors by default. This was a disappointment to the members present as Mr. Chambers and Mr. McRae, who were to uphold the honour of the Juniors, had prepared excellent papers and were confident that they could prove to the satisfaction of all, that Conscription would be beneficial to Canada.

Dr. R. D. Thornton relieved the situation by repeating impromptu an address on "Economic Conditions after the War". Dr. Thornton showed a great facility for remembering facts and gave some startling figures about conditions in Great Britain, United States and Canada. Dr. Thornton's address was greatly appreciated by the students, especially as it was given upon such short notice.

Dr. Webster was present and made an appeal for recruits for the new Freshman Class to start on February 1st. He commented upon the quick manner in which the budget had been put through, stating that he had been one of a deputation which waited upon the City Council all afternoon for a grant of \$1,000. The students granted more than that amount in less than half an hour. The meeting was then placed in the hands of Mr. E. T. Ingram, president of the Royal Dental Society, who took the chair.

Royal Dental Society

FOllowing the meeting of Parliament an extremely instructive meeting of the Royal Dental Society was held. An excellent paper, which appears in another part of this issue, was read by Dr H. K. Detweiler, on the subject of "Medical Aspects of Dental Infections and Their Relation to Dentistry". His paper assumed added interest when he described some of the experiments which have been carried out in his laboratories. The Dental Society is performing its proper duty to the students when speakers along dental subjects are secured. Last year some excellent meetings were held, but we think a new stimulus has been given to the interest in these meetings by the discussion of dental subjects. It is hoped that papers pertaining to dentistry will be read at every meeting this year. The Dental Society will in this way be contributing to the students' dental education.

Dr. J. S. Graham, professor of Bacteriology opened the discussion. He stated that Dr. Detweiler had been very conservative and had not committed himself, but had given a very excellent paper. Dr. Graham then described some of the experiments carried out in the laboratories of the Sick Children's Hospital.

Dr. Webster was then asked to discuss the paper. He responded and briefly stated out some debatable points in the paper. He took issue with the speaker on the point that the interne should have charge of a case and should dictate to the specialist the treatment. He stated that the specialist lost confidence in the interne when he showed an apparent lack of knowledge on some point which he as a specialist knew to be wrong. Consequently the specialist should dictate the treatment.

An excellent musical programme was rendered during the evening. Mr. J. F. Edmondson, choirmaster of Westmorland

Methodist Church, sang twice. Mr. Jules Brazil, the entertainer for the evening, provided any amount of amusement and was heartily appreciated. The College orchestra also added greatly to the musical part of the programme.

A suggestion is respectfully submitted that the students be given a part in the discussion of the papers read. Perhaps some point in the paper is not clear in the student's mind or perhaps has not been given due importance by the essayist. This may be made clear during the discussion. A greater advantage of student discussion would be the acquisition of the art of public speaking with ease.

The Royal Dental Society deserve great credit for the success of their first meeting for the season. On account of the meeting coming, as it did, so close to examinations, many students were unable to be present, but we feel sure that at the Society's next meeting a much larger representation will be present.

GUNNER V. D. SPEER WOUNDED.

Word has been received from headquarters that Gunner V. D. Speer has been wounded in France on November 20th. The official despatch states that he had been admitted to the 13th Field Ambulance suffering from gunshot wound in the hand: "Dong" was one of the members of Class '18 who left with the 67th Battery on June 15th. He was stationed at Shorncliffe all summer, and on November 10th left for Southampton, and from there sailed to Le Havre. On November 25th, a letter was received by his parents stating that he was near the reserve trenches and that the unit had been broken up, until he was totally alone. Another letter was received on December 4th, and in neither does he make mention of having been wounded. Rev. J. C. Speer, his father, wired Ottawa, but received no further word. It is thought possibly the wounding occurred on December 20th instead of November 20th. Up to the time of going to press no further word had been received. We hope that his wounds will prove only slight and that he may have a speedy recovery.

Gnr. V. D SPEER



Dental Debating Society

SOME years ago the late Dean Willmott donated a shield as a trophy for the debating in the R.C.D.S. For some time deep interest was shown along these lines but unfortunately either from lack of orators or enthusiasm, debating fell into the background. This year Dr. W. E. Willmott has asked that this might be revived and every effort will be made by those in charge to make debating more popular than ever. Already some interest is shown but in order to attain success the co-operation of everyone is required. Surely with an enrolment of two hundred and fifty students there are some real debaters amongst them.

The plan adopted is that two men be chosen from each year and debates held at intervals throughout the winter. The probable schedule is Junior *vs.* Freshman; Seniors *vs.* Sophs, and the winners debate for the championship.

The debaters will also be judged individually and the best two, whether winners of the shield or not, will be awarded suitable medals. The first debate will be held, Monday, December 18, at a meeting of the Students' Parliament. It is desirable that these meetings should be well attended. If you can't debate yourself show your interest by coming and hearing those who can.

We hope that debating will reach its old time popularity and once more be a prominent feature at the R.C.D.S.

THEY ALL DO.

When he finished his freshman year he thought that he would begin as far down on the commercial ladder as first vice-president, for he knew that by hard work and application he could fight his way to the topmost rung.

When his sophomore year was over he believed that it would be really the best for him to go in as Western field-manager. A taste of the West would do him good, anyhow.

When he had completed the junior year he decided that he would be content to accept the position of chief clerk, as a future president should know all the details of his business.

When his degree was given him he went out and applied for a job, just as anybody else would.—*The School.*

Athletics

HOCKEY.

INTER-FACULTY.

A meeting will be called shortly to decide on practice hours, also whether one or two teams should be entered in the Interfaculty Hockey. Considering the size of the Freshman Class and the amount of material in the Sophomore Class there should be no difficulty in placing a first class Junior team in the series. Although the Seniors haven't such an abundance of players to select a team from, they still have hopes of giving the best of them a run for the silverware.

As soon as the practice hours are announced it is up to every man in the College who has played hockey to turn out and help retain the hockey reputation of the R.C.D.S. and hold the Jennings Cup within its walls for another year.

THE DENTAL SENIOR O.H.A. TEAM.

Considerable discussion has been carried on by the city press as to the status of the Dental Hockey team in regard to their connection with the Royal College of Dental Surgeons.

We wish to state that the team is in no way connected with the College further than that a number of the prospective players are undergraduates, and the managing committee is partly composed of undergraduates.

The College Athletic Association and the Students Parliament are not in any way connected with the team.

Most of the players from the College are outlawed from Varsity athletics for participation in outside sports and cannot be blamed for breaking into the game under other colours.

Dr. "Jerry" Laflamme is manager and coach. Perhaps no other man in Toronto is more suited to the position. His experience is beyond doubt, his personality and stick to it are bound to bring results to the team.

The Dental profession in the city and the students will no doubt be greatly interested in the team throughout the season, and we will endeavour to report the games as fully as possible.

The team is grouped with Hamilton, St. Patricks and T.R. & A.A. in Sect. B, group I, Senior O.H.A.

A double schedule will be played.

The management absolutely refuse to give us their possible line-up, but we understand that the team will be picked from the following: C. Stewart, goal; Laflamme and Sheldon, defence; Box, rover; Milan, J. Stewart, Ferguson, Box, Smith, Hodgens and others, forwards.

The morning papers after their first practice night, all agreed that the team look like the pick of the Senior O.H.A. teams in Toronto.

BASKETBALL.

Below is given the schedule in the Sifton Cup series.

January 16—Sr. Meds. vs. Dents.

January 30—Dents vs. S.P.S.

February 3—Sr. Meds vs. Dents.

February 21—S.P.S. vs. Dents.

Manager Young is very optimistic about the prospects of his team and asks that the students support the team at the games.

Several of last year's men are again in uniform and a number of newcomers have turned out. Practises are held every Monday and Thursday.

“My son, when you're at college,”
 Remarked old Mr. Flint,
“I hope you'll be so prominent
 I'll see your name in print.”

Now John his father much esteemed
 And wished to see him glad,
So he got a school directory
 And mailed it to his dad.

Fair One—“And why, Stewart, do I bring memories of the piece of art which adorns your boudoir?”

James '18—Because I admire its frame so much.”

Mary had a little lamp,
 It was well-trained, no doubt,
For every time a fellow called,
 The little lamp went out.

Mirth

Young '18—"Say, Mike, did you see that girl with the purple veil and striped stockings?"

Brick '18—"Did she have on a purple veil?"

SPECIFIC IMMUNITY.

Mills, Sr.—"My son is taking operative under you this year, is he not?"

Dr. Webster—"Well, he has been exposed to it but I doubt if he will take it."

Leuty '18—"How did you like the stage hangings in *McBeth* last week?"

Dreury '18—Why, there were no hangings, he killed 'em with a sword.

N. Truemner '18 (to landlady)—"How much board do I owe you?"

Landlady—"How long have you been at college?"

R. Richardson '19—"Do you know Dr. Galley on College St.?"

Lewis '19—"Any relation of Christa Galli?"

Hord '19—"Have you seen Al?"

Hogg '19—"Al who?"

Hord—"Al-cohol, kero-sene him yesterday but he hasn't benzine since."

How is it, Mac, that you are at the bottom of your class again?

Reveler '18—Don't worry, father, they teach the same at both ends you know.

Montgomery '18—"Is Hallor-an?"

Mulvihill '18—"Yes, but not Fur-long."

Fauman '18—I filled that root canal with a single cone.

Schaffer '18—And I suppose there is room for Moses and Levi beside it.

HYA YAKA

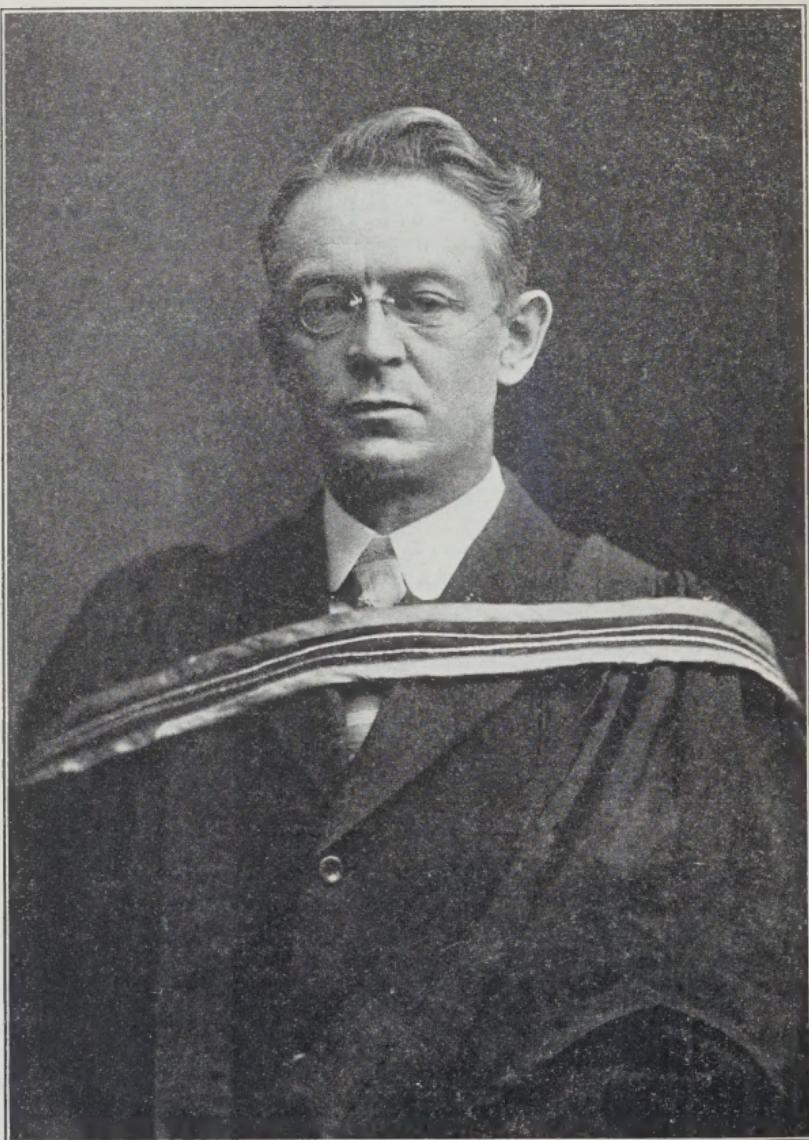
CONTENTS

VOL. XVI.

JANUARY, 1917.

No. 4.

	PAGE
Dr. W. E. Willmott, L.D.S., D.D.S.	<i>Frontispiece</i>
Active Service Roll.	139
One Phase of the Army Dental Corp work in France. A. W. Chambers '17.	143
Treatment and Filling of Root Canals. R. Ottolengai, D.D.S.	146
Correspondence—Letter from Sgt. G. A. Sirrs.	154
Der Hero.	156
Some Cases in Oral Surgery.	157
Never A Borrower Nor Lender Be. N. B. Temple '18	159
Editorials.	160
Note and Comment.	162
Personals and Marriages.	164
Third Informal Dance.	167
Well Known Dentists address Senior Students.	168
Mr. G. A. Warburton Tells of World Tour.	169
Overseas Freshman Class.	171
Athletics.	172
Mirth.	175
Questions and Answers.	180
Useful Hints.	181



W. E. WILLMOTT, D.D.S., L.D.S.

Senior Member of the Faculty, who has resumed duties at the College, after recovering from a severe attack of typhoid fever.

THE HYA YAKA

VOL. XVI.

TORONTO, JANUARY, 1917

No. 4

Active Service Roll

HONOUR ROLL

Major P. P. Ballachey, 58th Batt. Lieut. H. J. MacLaurin, 43rd Batt.

Major C. E. Sale, 18th Batt. Pte. H. Greenwood, 76th Batt.

Gnr. O. G. Dalrymple, 67th Battery.

CANADIAN ARMY DENTAL CORPS.

Overseas.

Lt.-Col. J. A. Armstrong	Capt. J. H. Duff	Capt. J. L. Kappele
Lt.-Col. George Gow	Capt. W. R. Eaman	Capt. E. J. Kelly
Lt.-Col. G. G. Hume	¶Capt. O. A. Elliott	Capt. F. W. B. Kelly
Major O. K. Gibson	Capt. R. W. Fell	Capt. Frank Knight
Major A. A. Smith	Capt. D. M. Foster	Capt. O. Leslie
Major Geo. K. Thompson	Capt. G. H. Fowler	Capt. H. Lionais
Capt. H. F. Alford	Capt. A. A. Garfat	Capt. A. G. Lough
Capt. R. H. Atkey	Capt. G. E. Gilfillan	Capt. F. R. Mallory
Capt. G. Atkinson	Capt. W. H. Gilroy	Capt. W. G. MacNevin
Capt. D. J. Bagshaw	Capt. J. S. Girvin	Capt. H. C. Macdonald
Capt. J. W. Bell	Capt. R. J. Godfrey	Capt. J. W. Macdonald
Capt. W. J. Bentley	Capt. H. C. Goodhand	Capt. D. K. McIntosh
Capt. J. F. Blair	Capt. E. A. Grant	Capt. E. D. Madden
Capt. G. C. Bonnycastle	Capt. W. R. Greene	Capt. S. P. Marlatt
Capt. G. H. Bray	Capt. W. T. Hackett	Capt. V. C. W. Marshall
Capt. F. C. Briggs	Capt. J. W. Hagey	Capt. L. L. Matchett
Capt. G. N. Briggs	Capt. D. H. Hammell	Capt. C. A. McBride
Capt. C. Brown	Capt. O. G. Hassard	Capt. W. J. McEwen
Capt. W. A. Burns	Capt. F. Hinds	Capt. C. E. McLaughlin
Capt. C. E. Campbell	Capt. H. C. Hodgson	Capt. R. McMeekin
Capt. G. S. Cameron	Capt. G. H. Hollingshead	Capt. B. P. McNally
Capt. E. H. Campbell	Capt. J. E. Holmes	Capt. E. McNeill
Capt. T. D. Campbell	Capt. E. W. Honsinger	Capt. C. H. Moore
Capt. A. V. Cashman	Capt. F. W. Howe	Capt. J. B. Morison
Capt. H. Clarke	Capt. E. C. Hutchison	Capt. G. V. Morton
Capt. E. H. Crawford	Capt. E. F. Jamieson	Capt. J. F. Morrison
Capt. A. R. Currie	Capt. R. Jamieson	Capt. A. E. Mullin
Capt. W. J. McL. Dolson	Capt. C. M. Joyce	Capt. Otto Nase

OVERSEAS—Continued.

Capt. B. L. Neiley	Capt. R. C. H. Staples	Capt. L. N. Trudeau
Capt. J. G. O'Neil	Capt. G. H. A. Stevenson	Capt. C. F. Walt
Capt. P. E. Picotte	Capt. H. Stewart	Capt. G. A. Wilcox
Capt. R. M. Peacock	Capt. J. A. Stewart	Capt. F. M. Williamson
Capt. J. W. Reynolds	Capt. D. P. Stratton	Capt. D. D. Wilson
Capt. J. G. Roberts	Capt. A. C. Steele	Capt. J. H. Wiltz
Capt. H. Ross	Capt. E. S. Tait	Capt. A. W. Winnett
Capt. J. A. Ross	Capt. H. P. Thompson	Capt. J. E. Wright
Capt. J. Roy	Capt. L. A. Thornton	Capt. K. F. Woodbury
Capt. W. A. Sangster	Capt. H. P. Travers	Sgt. H. Conway
Capt. J. F. Shute	Capt. W. G. Trelford	Sgt. L. S. Smith
Capt. E. B. Sparkes		

Concentration Camps.

†Lt.-Col. W. B. Clayton	Lieut. S. G. Alderson	Lieut. E. F. McGregor
Capt. N. S. Bailey	Lieut. H. R. Aljoe	Lieut. L. D. McLaurin
Capt. F. H. Bradley	Lieut. W. W. Astle	Lieut. W. H. McLaren
Capt. C. D. DesBrisay	Lieut. B. B. Beaton	Lieut. W. S. McLaren
Capt. J. P. Gallagher	Lieut. J. A. Beatty	Lieut. G. R. McMillan
Capt. B. R. Gardiner	Lieut. E. G. Berry	Lieut. G. A. Munroe
Capt. W. Y. Hayden	Lieut. R. W. Blackwell	Lieut. F. H. Quinn
Capt. P. J. Healey	Lieut. R. M. Box	Lieut. J. H. Reid
Capt. H. J. Henderson	Lieut. T. W. Caldwell	Lieut. W. H. Reid
Capt. Leo Leonard	Lieut. R. Conway	Lieut. T. E. E. Robins
Capt. C. C. MacLachlan	Lieut. J. R. Crockett	Lieut. W. J. Rutherford
Capt. Jas. M. Magee	Lieut. Karl Damon	Lieut. H. A. Simmons
Capt. H. L. Mitchener	Lieut. J. M. Deans	Lieut. W. Sinclair
Capt. H. A. Nesbitt	Lieut. J. N. Dunning	Lieut. W. J. Taylor
Capt. N. Rutherford	Lieut. H. B. Findley	Lieut. A. J. Thomas
Capt. H. A. Semple	Lieut. R. W. Frank	Lieut. E. L. Thompson
Capt. S. H. Simpson	Lieut. R. O. Howie	Lieut. T. S. Tucker
Capt. P. E. Sutton	Lieut. H. C. Jeffrey	Lieut. J. W. Turner
Capt. Thompson	Lieut. R. R. Larmour	Lieut. B. L. Washburn
Capt. J. H. Zinn	Lieut. L. Lemire	Lieut. V. D. Wescott
Capt. E. R. Zimmerman	Lieut. T. H. Levey	Lieut. C. E. Williams
Capt. G. R. Zimmerman	Lieut. H. C. Mann	Lieut. E. H. Wilson
Lieut. J. T. Adams	Lieut. D. W. Massey	Sergt. C. C. Graham
	Lieut. C. F. McCartney	Sgt. C. H. Lipsey

Divisional Officers.

Major F. Bradley	Major H. T. Minogue	Major. F. M. Wells
Major T. C. Bruce	Major F. P. Shaw	Major J. M. Wilson
Major A. Dubord	Major W. G. Thomson	Major W. W. Wright

ATTACHED TO OTHER CORPS OTHER THAN C.A.D.C.**Overseas**

Lt.-Col. E. F. Armstrong, 159th Batt.	Capt. J. Harper, Royal Navy
Lt.-Col. Neil Smith, 180th Batt.	Capt. A. L. Johnson, 68th Batt.
Major G. S. Cameron, 9th C.M.R.	Capt. J. L. McLean, 59th Batt.
Major F. T. Coghlan, 25th Battery	Capt. Walter McNally, 179th Batt.
Major Chas. A. Corrigan, Army Service Corps	Capt. S. J. Redpath, 47th Batt.
Major H. A. Croll, 10th C.M.R.	Lieut. A. J. Kennedy, 114th Batt.
Major N. Schnarr, 94th Batt.	Lieut. A. R. Leggo, 58th Batt.
Capt. K. C. Campbell, 43rd Batt.	Lieut. C. Nicholson, 129th Batt.
Capt. J. R. Duff, 79th Batt.	Lieut. C. E. Wright, 80th Batt.

UNDERGRADUATES**Overseas**

Capt. R. M. Barbour, 64th Batt.	J. V. Lally, C.A.D.C.
Capt. J. A. Egan	H. B. Legate, C.A.D.C.
Lieut. J. G. Larmour, R.F.A.	W. M. MacKay, C.A.D.C.
Lieut. R. B. McGuire, 15th Middlesex Batt. (Br.)	A. W. McKay, C.A.D.C.
Lieut. T. H. O'Rourke, 180th Batt.	E. C. McKee, C.A.D.C.
W. G. Alston, C.A.D.C.	J. M. McLeod, Div. Signal Corps
H. R. Anderson, 67th Batty.	C. T. Moyle, C.A.D.C.
H. G. Bean, C.A.D.C.	G. S. Murray, C.A.D.C.
R. T. Broadworth, 67th Batty.	A. L. Norton, C.A.D.C.
A. G. Calbeck, 67th Batty.	C. Parker, C.A.D.C.
F. Cluff, 161st Batt.	A. R. Poag, C.A.D.C.
E. R. Dixon, Mach. Gun	G. Pollock, 67th Batty.
R. W. Freestone, 67th Batty.	R. G. Reid, Mechanical Transport
E. Garfat, 71st Batt.	J. N. Robertson, C.A.D.C.
G. E. Harper, 118th Batt.	W. E. Sheridan, 67th Batty.
G. M. Heisz, Div. Signal Corps	G. A. Sirrs, C.A.D.C.
G. W. Howson, 126th Batt.	†G. H. Sloan, 30th Batt.
A. S. Holmes, Div. Signal Corps	W. H. Smith, 160th Batt.
E. V. Humphries, C.A.D.C.	W. L. Smith, Div. Signal Corps
R. G. Hyde, C.A.D.C.	C. W. Steele
J. T. Irwin, C.A.D.C.	†V. D. Speer, 67th Batty.
†J. E. Irwin, 4th U. of T. Co.	F. L. Thompson, C.A.D.C.
G. G. Jewitt, Artillery	T. E. Walker, C.F.A.
A. W. Jones, C.A.D.C.	A. Walton, C.A.D.C.
	B. Watson, C.A.M.C.

Concentration Camps

Lieut. R. Bishop, 252nd Batt.
A. E. Chegwin, C.A.D.C.
A. F. Cooper, P.S.I.
E. V. Elliott, C.A.D.C.
R. W. Hall, C.A.D.C.
T. H. Hutchinson, C.A.D.C.
A. C. Mallough, C.A.M.C.

G. F. Mitchell, C.A.D.C.
E. McFeetors
A. Poyntz, C.A.D.C.
C. C. Ramage, C.A.M.C.
J. L. Rogers, C.A.D.C.
W. B. Shantz

†Acting Director of Dental Services, address Ottawa. *Lieutenants rank as Captains while overseas. C.A.D.C. overseas address—Care Director Dental Services, Canadian Contingents, 23 Earls Ave., Folkestone, England.

‡ Wounded.

One Phase of the Army Dental Corps' Work in France

A. W. CHAMBERS '17.

SO much has been said in connection with the work of the Dental Corps that there remains very little for me to say—consequently, I will not weary you with statistics, records, etc.

The most interesting part of the time spent by me in the Army commenced the morning of August 23, 1915, when with three other sergeants, two batmen and six officers, I left Shorncliffe for Southampton, from which port we were ordered to embark for France.

It was one of the grandest experiences of my life that crossing of the English Channel. It was there and then that one gained at least some idea of Britain's naval power. We were escorted by two powerful and fast destroyers. The water was swept by dozens of wonderful search-lights from forts and battle ships further out in the Channel. No lights could be seen—the ship being in total darkness, except those parts where light was necessary for the working of the vessel, and of course, these could not be seen from the outside. Woe betide anyone who struck a match. Swiftly and silently we rushed across the Channel to Havre.

Captain Greene of Ottawa was in command of our party—the first of the Dental Corps to land in France. After marching a distance of seven miles we arrived by passing through the town of Havre and the village of Harfleur at Canadian Base Camp. This Camp at that time was quite small, so that they were not able to accommodate us in a suitable building. The result was we were handed over to the Imperial Authorities. They received us very kindly and commenced at once to make things as comfortable as far as active service conditions would allow.

Up to this time very little Dental work had been attempted in France among the British troops, and it was the opinion of the Military Authorities that beyond extractions and a few minor operations very little could be accomplished satisfactorily. Therefore here lay our opportunity to prove that more elaborate dental work was necessary, and with their assistance a great deal more

than they were anticipating could and would be accomplished. They gave us a suitable building and plenty of material and labour to construct our clinic in whatever way we might deem best. After two weeks, the building was ready for our occupation, furnished with metal covered benches, shelves, cupboards, drawers, running water, sinks, electric power, etc.

While the building was being prepared, we spent our time enquiring into the amount of work waiting for us. The Senior Medical Officer (S.M.O.) had waiting on his books the names of five hundred men for dentures. Our staff in the laboratory consisted of four sergeants and two batmen, so we were going to be kept busy. The building we occupied was a long wooden hut, about 20 ft. by 100 ft. We were only to use one half of this, the other half to be used by some English Dentists.

We started to work in earnest, but soon recognized it would be impossible for us to cope with the work. The Medical Board were putting names on the waiting list much faster than we could get them off. The English dentists started to work about a month after us, so that the pressure was relieved considerably as they had six mechanics. But even then we could not get ahead of the work. Winter was setting in, with the result they were sending, many more men down from the line for dental treatment. We made application for reinforcements. The Authorities after due consideration decided that better results and more work could be accomplished if the dental work for that base was placed under one officer and the two units co-ordinated. Consequently Capt. Greene was made the senior Dental Officer and the two outfits were united. The building was remodelled and reinforcements were sent, so that our strength was brought up to nine officers and forty N. C. O's and men. I was promoted to Sergt. Major and placed in charge of the laboratory. By this time, a waiting list of men requiring dentures had increased to eight hundred. One will easily see that a good working system would be necessary in order that men should be attended to and completed in the order in which they were sent to the base.

The men went before a board of Medical Officers who examined their mouths and decided whether they should be given dentures. If so, their names were put on the board book. This book was sent to us every night so that we were able to copy them into another book which we retained. Every night a list of names of men who were to attend the Dental Clinic the next day was sent

out to the different camps. This list contained names of new patients taken from the waiting list in the order in which they had been placed there by the board. The names of patients whose dentures were ready to try in and those whose dentures were finished were also on the list. When the patient presented for treatment, he was given a card with his name, rank, regimental number and unit written on it. Directly a chair was vacant, the next in order was ushered into it. Whatever work was completed for him at that setting, was recorded on the back of the card by the operator. When he returned, it was not necessary for him to see the same operator. The card was taken from him as he passed out of the door, a clerk copied out the nature of the operation on a sheet kept separately for each officer, so that he might get full credit of all work done by him. In this way about 150 patients were attended to daily. As the work was completed for each patient, the orderly room of his camp was notified that evening, so that there was no delay and he could be returned to the front immediately.

We were highly complimented upon the promptness in which the work was completed and patients made fit, by Gen. Sloggett, Surgeon-General of the British Army.

The work in the laboratory was kept track of in much the same way. Where impressions were taken, they were sent to a clerk in the laboratory with a ticket containing patients name, number, rank, etc. Each ticket was numbered consecutively. The clerk copied these particulars with patients name into a book which was kept for future reference in case of enquiries, etc. After the impressions had been poured and separated, the number was carried the reverse way into the model so that after the denture was vulcanized the number appeared the right way up. In this manner almost seventeen thousand new dentures and repairs passed through our hands, and over ten thousand men were made fit to return to the front during the thirteen months I spent in France.

The work is still continuing in this manner. Beside this, we have men with the Field Ambulances, casualty clearing stations, stationary hospitals, etc., doing immediate relief work, taking impressions for new dentures and repairs, and sending them to the base laboratory for completion. We also did work for about twenty English casualty-clearing stations. So you may judge the value of the work being done by the Canadian Dental Corps in France.

Root Canal Treatment

RODRIGUES OTTOLENGUI, D.D.S., New York.

Read before Toronto Dental Society, December, 1916.

PERHAPS the most potent problem which confronts the dental world to-day is the problem of correctly treating and filling root canals. This problem, of course, has always been before the profession as a vital issue, but it is more vital than ever. It is a problem that never has been solved, and has not yet been solved, but the solution is nearer than ever.

At the outset let me declare that I am not posing as one who can fill the canals of all teeth to their apices; but I wish to present a technique with which I fill more canals to their apices this year than I did last year; and with which, through practice, I expect to be able to obtain a greater proportion of success as the years go by. It is a technique, too, with which, when a canal is filled to its apex, we may feel reasonably sure that it will not become infected, if it had not been infected at the outset.

In regard to filling all roots to their ends, carping critics, such men as we always find standing as obstacles in the path of progress, men who invariably count as impossible the things they cannot themselves do; such men, I say are repeatedly approaching me at meetings to hand me some tooth with twisted or distorted roots with the half-sneering remark, "I presume that one would be easy for you."

Such arguments, if they prove anything at all, merely prove that there are teeth the canals of which are beyond human skill. Yet even some of these would be found surprising easy if treated in the mouth, for there be many tortuous canals that can be successfully managed, provided the operator does not himself block his channel with faulty instrumentation.

At all events, the most that we are obliged to admit is that there are some teeth which we cannot successfully treat. This is true of all surgical operations, and root canal work is a surgical operation, an operation demanding the most exacting and slavish obedience to routine. If we would but dismiss from our minds these impossible cases; if we would constantly say to ourselves,

"Perhaps Dr. X—— could fill this root," soon, very soon we would find less roots that we must send over to Dr. X—— for treatment

Root canal treatment may be divided into two distinct phases. The first includes all those cases that come to us uninfected, teeth having living pulps which, however, require removal. Second are those cases where infection has already supervened. These latter are to be subdivided into those that may be cured, those that are beyond cure, and those that might have been cured if some previous operator had not mutilated the canals with drills or broken instruments. My friends, let us beware of so treating teeth that when our patient appeals to a conferre he shall find the afflicted tooth in this last class because of our maltreatment, mistreatment or misfortune. And let me inject here the comment that misfortunes, such as the breaking of instruments, may be minimized if constantly kept in mind as possible, so that the maximum of caution is observed.

Let us then briefly outline the technique of the management of these various conditions.

REMOVAL OF LIVING PULPS.

Where the pulp is alive at the outset, it is manifestly the duty of the operator to remove it without infecting the canal or apical tissues. This requires constant attention to aseptic and antiseptic precautions. In root canal work we cannot hope to make our dental asepsis equal to true surgical asepsis, but if we recognize the weak spots in our attempts at asepsis, we may fully protect the patient with germicidal or antiseptic agents. As for example, we cannot sterilize the entire mouth, but we can with fair certainty sterilize the immediate field of operation; we may then isolate this field with the rubber dam; and we can then again sterilize the included teeth and the dam itself.

Before removing a pulp, therefore, and the routine is the same in all canal treatment, the gums and four or five teeth should be thoroughly cleansed, using a disclosing solution to be sure that all placques have been removed, and tapes with pumice or what I prefer, a fine silex, between the teeth. The parts are then to be thoroughly sprayed to make sure that no debris remains. Next use a cotton swab dipped in alcohol and rub the gum well, to remove all inspissated mucous. Finally coat the gums and teeth with tincture iodine, forcing the iodine under the gingival crevice with a

sharpened orangewood blade. The rubber dam should be washed with a germicidal soap and boiled. After placing it so as to isolate four teeth at least, the surfaces of all teeth and of the dam itself should be swabbed with alcohol. This alcoholic swab may be repeated throughout the operation, especially when blood or seepage of any kind escapes from the canal and flows upon the dam or adjacent teeth.

ARSENIC.

Arsenic should never be used. I say never because there is practically no condition in which it is excusable. If pressure anesthesia should not prove effectual, we still have conductive anesthesia, as well as intra-osseous anesthesia. In extreme cases we may even use full anesthesia, for which purposes I have used nitrous oxide and oxygen, and even chloroform.

In ordinary cases, however, pressure anesthesia answers every purpose, provided the proper technique be employed and patience be exhibited. Operators frequently remove pulps, causing pain to the patient and a lessening respect for the method in the dentist's own mind, when one more three minutes' application of the anesthetic would have brought about a painless operation.

When the pulp is not actually exposed, but nevertheless must be removed, the exposure of the pulp may usually be accomplished with comparatively little pain, by the use of the chloride of ethyl spray followed by the utilization of large new sharp round burs. They should be new because if never before used on teeth, they are less likely to be contaminated and may be rendered safe if dipped in alcohol and then set on fire two or three times, which occupies but a few seconds. The bur should be sharp because sharp burs cut less with jar, and therefore with less pain. They should be large and used with a lateral sweep so as to avoid dipping into the canal, thus stabbing the vital pulp. Just as soon as the minutest exposure is evidenced by the escape of a drop of blood, the anesthetic should be used.

PRESSURE ANESTHESIA.

A drop of sterile water is dropped on a clean sterile slab and one or two billets of neurocaine dropped into this. No effort should be made to dissolve the billet; it should merely be saturated. Such a billet is then picked up on a plegget of cotton, taken from a receptacle which is brought direct from the sterilizer, and with this the wet neurocaine is placed over the exposure. Observe that there

is little or no water, hence the cavity is comparatively dry, an important matter. Next a mass of pure bee's wax is made slightly plastic and pressed into the cavity and over the cotton. Very light pressure is used at first, and the case is allowed to rest for half a minute. Then a large egg-shaped burnisher is placed upon the wax and slowly increasing pressure is made in the direction of the pulp. This may cause the patient to wince at first, but this shock soon subsides. When a burnisher can be forced quite through the wax, anesthesia is usually profound and pulp removal painless.

The procedure, of course, is not always as simple as here outlined, but success usually follows patience and repeated applications. It is because of this that a full hour should be set aside for this operation. It should not be hurried, because, once begun, it should never be partly completed and then left for the next day. Disaster almost always follows such a course.

PULP REMOVAL.

To remove a pulp use the finest barbed broach procurable. Turn the barbs towards one wall of the canal and endeavour to slip the broach between the pulp and the canal wall as far as possible. Then turn it around once and slowly withdraw. The pulp in most cases will come away entire.

The removal of a pulp is commonly followed by a copious flow of blood. This should be encouraged, never checked with hemostatics. Either use paper canal points to invite the flow of blood or syringe out with warm sterile water. Allow the bleeding to cease naturally. This depletes the capillaries and renders secondary hemorrhage less likely.

SECONDARY HEMORRHAGE.

This secondary hemorrhage, however, is always a possibility, and if the canal be blocked with cotton charged with some oily drug, as is common practice, this resumption of bleeding causes an accumulation of blood about the apex, often inducing an acute pericementitis which may result in infection and abscess, a most disagreeable denouement where the patient originally presents with an uninfected tooth. It was such an instance in my own practice that caused me to abandon medicated dressings in root canals.

After pulp removal, I now dress the canal either with a dry sterile cotton dressing, or with a paper cone where the canal is large enough. The paper cone is more desirable where it can be used, because it is more easily kept sterile. The object of this dry dressing

is to draw up into the canal by capillary attraction any blood that may seep from the capillaries after the tooth has been sealed up. This fortunately does not always occur, but let an operator try this method and some day, on the second visit, find his dressing saturated with blood, while the tooth itself has remained absolutely comfortable, and he must become convinced of its efficaciousness.

REMOVAL OF PULP TERMINALS.

Before passing from the subject of pulp removal, I must allude to one important particular. No one can tell by examination of a removed pulp whether the pulp has come away entire or not. Quite often the main body of the pulp is torn away, leaving some pulp tissues still adherent at the apex. If this is left in till anesthesia subsides, it becomes one of the most painful conditions that I know of to handle at a subsequent sitting. It is essential, therefore, to make sure that no particle of pulp is left. This can be accomplished by using an instrument known under the somewhat extraordinary name, "Apexographer." This is a very fine, smooth bristle with two or three barbs at the extreme point. Its use after the main portion of the pulp has been removed will often surprise the operator by the size of the fragment of pulp that will be brought away.

INFECTED TEETH.

We come now to infected teeth. If we know positively that an active abscess is present, there is no object in delaying treatment. I have frequently incubated material removed from the canals of such teeth, and also material collected from beyond the foramen, and invariably we find the same organisms. Where the pulp canal alone is infected, we should proceed more cautiously, and Buckley's method of introducing formo-cresol into the pulp chamber and sealing it in for twenty-four hours will often obviate the danger of forcing infected material into the apical area. However, I never saturate a dressing with formo-cresol and force it up into the canal. It is quite sufficiently effective placed lightly into the coronal end of the canal.

ALVEOLAR ABSCESS.

Of abscesses we have several varieties. The acute abscess, such as may result from sudden death of a pulp by trauma, with a rapid accretion of pus and considerable swelling, usually alarms the patient, but treatment is comparatively simple in most cases.

An incision with a lance and dressing with iodoform gauze for two or three days will resolve the conditions to a state of quiescence, when the canal work may be done. If the latter is successfully accomplished, all traces of the abscess will disappear.

Chronic abscess is not so simple, and treatment and cure will depend upon the extent of the infection, and much may be learned from a radiograph.

Many claims are made that such conditions may be cured by ionization. I hope so, and am still endeavoring to learn how to accomplish it. Thus far, however, I have not been very successful. My experience has generally been that, upon opening the tooth and draining the abscess through the canal, the fistula may close, but even after repeated ionizations, upon filling the root canal and tooth, the fistula has reopened, showing that the abscess has persisted. The recourse then has been to root amputation, an operation in which every so-called "surgeon dentist" should become proficient. Otherwise he should erase the word "surgeon" from his cards and stationery.

I am quite aware that the above is contrary to the reported experience of other men. You need not, therefore, accept this as a fact. Quite possibly my technique has been faulty.

GRANULOMAS.

We come now to the much discussed abscess without fistula. It is very questionable in my mind whether this should longer be considered an abscess at all. Usually in these cases the radiograph shows a well-defined area of bone rarification, and if the tooth be extracted, we find at the apex a mass of soft tissue which years ago was called an abscess sac, but which now is spoken of as a granuloma. If the word sac conveys the idea of a tissue bag filled with pus, it is a misnomer. Except in the case of true cysts, these tumors are very solid. Whether they begin as a result of infection, or become infected subsequently, is another question open to discussion. That organisms can be isolated from these granulomas after extraction seems to be the common experience. Yet sections of granulomas, when stained for bacteria, have thus far defied our experimental research. That the organisms should abide solely at the periphery, thus making it possible to incubate them by merely dipping the extracted root end into bouillon seems extraordinary. As I said at the outset, this root canal question has not yet been fully studied out.

However, it is exactly these granulomatous cases that are said to be the most prolific causes of distant symptoms. Hence they must be cured, eradicated, or the teeth extracted. Fortunately, ionization in these cases seems to be efficacious in many instances. At least, we have evidence, as I shall show you, of such conditions clearing up and giving place to growth of new bone, after ionization. Some say that these cases have been cured by ionization; others that they have cleared up as a result of the canal treatment.

It seems to me that the important point is that cure is possible. At present the burden of proof or disproof lies with the opponents of ionization, none of whom has as yet shown such radiographic evidence of cures effected, as have been presented by those using ionization. I am, therefore, inclined to the belief that there is much virtue in ionization for the cure of those cases where granulomas are present.

ROOT CANAL FILLING.

In all cases, of course, root canal filling entails the same technique. The main point to be secured is the hermetical sealing of the canal from end to end. Some tell us that we must fill to the end, but not beyond. Unfortunately, these men do not give us a technique that will accomplish this. Dr. Rhein and many others now believe that, unless the root canal filling passes slightly beyond the end, we can have no assurance that the foramen is sealed.

With this view I am in accord. At the same time, I also agree with those that argue that gutta percha is a foreign body, and however tolerant the tissues may be to gutta percha, these same tissues certainly can live in peace and comfort without such intrusion. Hence it is my endeavor to force a little chloropercha through the foramen, but to prevent the actual cone from protruding. In this manner we may accomplish the sealing of the foramen, or even the overflowing of the chloropercha over the end of the root where the cementum itself may be stripped off, but we avoid projecting a mass of gutta percha into the tissues beyond.

Perhaps the best method of preventing the protrusion of the cone is not to use a cone at all. Formerly I would cut off the extreme tip of a cone and gently force this to the end and into the chloropercha. The idea was that the chloropercha would absorb this tiny tip of the gutta percha cone, and actual protrusion would be prevented.

Nowadays I believe I have improved on this method. I have persuaded the S. S. White Co. to put up for us gutta percha points,

not cone-shaped at all, but of equal diameter throughout. These are so fine that one might say they are cut from gutta percha wire, if you can imagine such a thing. Perhaps they may be called gutta percha rods.

The main fact is that they are so fine that they pass into very minute canals, and are quickly absorbed into the previously placed chloropercha, without danger of protruding one through the end, save, of course, where the foramen is abnormally large, in which case a different technique is requisite.

The method is to dry the canal with warm air. Then saturate it with eucalyptol, thus excluding air, and lubricating the canal at the same time. This is followed with chloropercha introduced with fine canal instruments and a pumping motion. I recommend those who have never done this to draw out some glass pipettes into attenuated simulations of root canals, and practise this introduction of the chloropercha. The transparency of the glass will permit the operator to watch the action of the chloropercha, and in this manner he will comprehend the technique better and will be less liable to force unnecessary quantities of the material through the end of the root.

Next the gutta percha rods are introduced, at first using perhaps but half a rod. As these rods are forced one after the other into the canal, they are slowly incorporated into the chloropercha, which at first being of the consistency of milk, let us say, soon becomes as thick as cream, then like a heavy oil, then like a melted tar, and finally stiffer and stiffer, until in the end we have changed the mass into a homogeneous whole, absolutely of the form of the canal and conforming with the canal walls.

Thus we do not fill a canal with chloropercha followed by a cone of gutta percha. But we pursue a method of gradually altering fluid or dissolved gutta percha into a solid mass, with no chloropercha left, and hence no shrinkage from evaporation possible.

At that stage when the gutta percha in the canal is of a tar-like consistency, no extreme force having been used up to this moment, a cone, which is not too large, may be forced into the canal and malletted home, upon which a slight oozing of the still slightly soft mass through the end of the root results in a sealing of the foramen without forcing an extra quantity of material through. The success of this will depend upon the deftness of the operator, but the results improve with practice.—*Dominion Dental Journal*.

Correspondence

EXTRACTS FROM LETTERS FROM G. A. SIRRS.

We are attached to the C.A.S.C. for rations. They have a pretty fair sergt's mess but I don't think it is as good as the 51st.

My friend from Prince Edward Island and I spent a very nice week end this week. We went down to our home in Hazelmere on Saturday evening, had tea and went to the movies which was very good. When we got back to the house, the lady of the house offered to allow us to stay there all night instead of walking back to camp. We had no sleeping passes but took the chance and stayed. I did not wake up until 11 a.m. and then because someone made a noise in bringing our breakfast into the room. Imagine breakfast in bed in the army! In the afternoon we went out to the museum which was certainly worth seeing.

When we returned, guests had arrived—an old lady and gentleman who had come down from Harrow, a suburb of London, to meet their son. He had just arrived from Canada in the Canadian army. We had intended going to church in the evening, but we got talking of Canada to the old couple and were too late for church which commenced at 6.15 (Church of England). We must have sat and talked for over two hours about our experiences. My friend had some thrilling stories to tell, as he was in the secret service force of Canada and travelled from Toronto to Halifax.

We then went up to Hazelmere drill hall and attended a Sunday evening musical given by the Queen's Band, Guildford. We got back to camp about 11.30 at night and found everything alright. No one had missed us. It is very nice to be able to get away from the camp once in a while and mix up with others than soldiers.

The work in the lab. is still going on as usual with lots to do but I like the work pretty well. I have turned out fourteen plates this week—that is working $5\frac{1}{2}$ days per week. I am picking up plate work pretty well and have certainly learned a lot about it. I have also learned speed as it used to take us about three weeks to make a plate at the college. Gord. Murray says that he has lots of time on his hands. Well, believe me, I haven't during working hours. He isn't working in a lab. though.

You don't need to worry about me going to France so long as I am in the Dental Corps, as they are bringing the most of the Dental Corps back from France to England. If in France, we might see some excitement of some kind but here the great trouble is monotony and mud, but we are lucky to have a nice dry hut to live in.

I had a great six-day visit in London. I hardly know how to start off to describe to you just what I did. I arrived about 8.30 Wednesday night and went straight to the Aldwich Hut Y.M.C.A. and booked a room. It is a very home-like place and run entirely by voluntary work. Here is a staff of about 60 women and girls, some of whom are very wealthy and they do everything possible for the comfort of the men.

The next day I met a young chap from Vancouver and we went out to the Zoological gardens for the day. Riverdale would seem like a back yard compared to it. I forget the routine of events after the first day, but I saw nearly all of the old famous places in London and vicinity including the Tower of London, St. Paul's Cathedral, Westminster Abbey, Buckingham Palace, Houses of Parliament, British Museum, Madame Taussaud's wax works, chamber of horrors, etc. Went to church at St. Paul's Cathedral Sunday morning and the service was beautiful.

I also had the opportunity to visit Hampton Court and Palace which is over 400 years old. In it I saw the bedrooms occupied by Royalty, the bed that Geo. II slept in and the chair that Oliver Cromwell sat on and many other interesting relics including Henry VII's famous pond, garden and vine. It is a grape vine planted in his time and still living. The last day I was in London there was a day-light air-raid by hostile aëroplanes.

After all that six days of life it was "like pulling teeth" to come back to work but I am getting settled down again now. With best regards,

G. ARMOND SIRRS.

“Der Hero”

Hans Heilberg vas braver more
Dan any man der vas;
All by himself he burn a church,
Undt gets der Iron Cross.

Some vimmens undt some children too
Anoder day he shot,
Undt so for making frightfulness
Vunce more der Cross he got.

He flew to England von dark night
Anoder Cross to vin,
Undt killed some vimmens mit a bomb
Dropdt from a Zeppelin.

For hiding mit a maxim gun
Inside an ambulance,
An extra large size Cross he von,
Der noble-minded Hans.

He vent into a cellar vonce,
Mit comrades eight or nine;
Undt get der Iron Cross again
For trinkng all der vine.

So vinning Crosses all der day,
He vent his Kultured vay;
His chest vas covered up mit dem,
He von dem twice a day.

Undt ven he had no room for more,
He hung dem on his back,
Undt also down his trouser-legs
Undt on his haversack.

Ontil beneath der load he fell
(Der veight vas tons undt tons)
Undt so to Krupp's dey took him schnell
Undt made him into guns.

Some Cases in Oral Surgery

Case No. 5.—ROOT AMPUTATION.

Surgeon—A. E. Webster, D.D.S., M.D.

Operator—M. C. Mills.

HISTORY.—On October 27, 1916, Mrs. —— presented a superior left central incisor with extreme soreness over apical region. The tooth was marked by extensive proximal decay. Patient gave a history of having had root filled and gold fillings inserted in both proximal surfaces about six years previous.

Root canal was opened into, which showed to be filled with cotton. This was removed and root canal wiped out as clean as possible by cotton. A dressing of fermo cresol was sealed in for a couple of days. This treatment was continued for two or three times. At the end of this period root canal seemed to be dry and soreness relieved at apex. A chloro percha root filling was then inserted and left for a few days. In the meantime however a soreness had again developed which continued till root canal filling was removed. Further treatment with Fermo-cresol was begun lasting over a period of about 3 weeks but without relieving of the suppuration or apical soreness. Mr. Mills, the operator, referred the case to Dr. Mason who advised taking a Radiograph. This was done and showed a large rarefied area over apex. Root amputation was advised.

TREATMENT.—*1st Sitting.*—On Friday, December 8, Dr. A. E. Webster made an incision through the gum under local anaesthesia over the apical region of the tooth. A second bur was used to cut away sufficient bone to give access to apex of the root. End of root was then smoothed off and necrotic tissue removed with a curette. Wound was packed with borated gauze and creosote sealed in canal.

2nd Sitting.—On Saturday December 9, root canal was filled by Callahans Method by Mr. Mills, and a new dressing of borated gauze inserted.

3rd Sitting.—A new radiograph was taken and another dressing of gauze inserted.



Radio Bath showing Root Canal filled to the apex, and smoothed off.

4th Sitting.—Radiograph showed wire extending through apex. Dr. Webster trimmed off excess and another X-ray was taken, which showed root canal completely filled to apex. Gauze was removed and patient advised to the normal saline to keep wound clean.

5th Sitting.—On January 9, case showed wound to be completely healed. Preparation was then made for insertion of a Richmond crown.

OF COURSE.

Marion '20—Which do you think are the more enlightened, people in the city or the people in the country?"

Girvin '20—"Why the people in the country, of course."

Marion—"How do you make that out?"

Girvin—"Why, doesn't every one say that the population in the city is very dense?"

ANYWAY, HE WAS A RUNNER.

"Are you a good runner?" asked the Kansas farmer of a student applying for a job on his ranch. The student said he was. "Well," said the farmer, "you can round up the sheep." After several hours the student returned, perspiring, and out of breath. "I got the sheep, all right," he reported, "but I had a fierce time getting the lambs."

"The lambs?" said the farmer. "I haven't any lambs." "Well," replied the student, "they're in the corral." Thereupon the farmer went to investigate. In the corral with the exhausted sheep he found half a dozen panting jack-rabbits.—*The School.*

Clark '20—Where is the Dead Sea?

Bartholomew '20—Don't know.

Clark '20—Don't know where the Dead Sea is?

Bartholomew '20—No, I didn't know any of the seas were sick.

“Never a Borrower or a Lender Be”

N. B. TEMPLE '18

There is much philosophy in the above adage. How much ill-feeling is created by borrowing and lending? A student lends an instrument and how rarely it is returned to him. Unless he keeps tab on it and seeks it, it rarely comes back. I do not wish to say that the borrower is dishonest; pure thoughtlessness is more often the cause.

A student borrows an instrument, and uses it. Perhaps he is pressed for time and leaves it lying about. Someone else makes use of it, and so it goes. When the owner wishes to use that instrument he has no trace of it, and appeals to those around him do not disclose its whereabouts. Perhaps he traces it up and finds it, but time is lost which may be of great value to him at that time.

Situated as we are here it is impossible not to borrow and lend, but is there any reason on earth why the article borrowed should not be returned?

The value of the average instrument or material is not great but the inconvenience caused by its loss often is.

Don't be thoughtless. If you are thoughtless at school how much more so will you be when you get older and your habits are formed?

Thoughtlessness is a sign of selfishness and who cares for a selfish man?

Get the habit. When you borrow an article be sure to restore it. Not to-morrow or next week, but as soon as you are finished with it.

If everyone did this there would be a great decrease of “blue lights” around the labs.

Why does Hogg 1T9 wear pig skin gloves?

He probably believes in patronizing home industry.

Judge—You can take your choice, ten dollars or ten days.

Prisoner (still in doubt)—I'll take the money y'r Honor.—*Boston Transcript.*

THE HYA YAKA

A JOURNAL PUBLISHED MONTHLY DURING THE COLLEGE YEAR
BY THE STUDENTS OF THE ROYAL COLLEGE OF
DENTAL SURGEONS OF ONTARIO

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Editorials

THE NEW YEAR.

THE old year has passed—the new is upon us. All the mistakes and misfortunes of the past have been obliterated by its passing. Perhaps no other one year has been looked forward to with such anticipation by the members of class '17 than this when graduation is so nearly a realization. A short while ago the members of class '18 would never have dreamed that this year they too should be so near that realization, but that has been made possible during the year that is past.

The coming of the new year marks for some of us the last few short months of our college career. It behooves us, then, to make the most of our remaining time. Our resolutions must be turned into actions. Our ideals must be higher as we have benefitted by the experiences of the past. For others it marks but a stage further in the educational development; for still others it means the transfer from civil to military life. For each of us—what? In any case it demands our best! May it receive our best!

HONOR AMONG STUDENTS.

Much has been written about and many suggestions have been offered for the eradication of the prevalent laxity of students in restoring borrowed instruments or in returning lost articles to their

proper owners. But still the evil persists unchecked, and has even grown to an alarming extent in some classes. Perhaps those who have been the victims feel the injustice more keenly, but have we not all suffered to a greater or lesser extent?

Faculty and students alike are now working for its suppression, and already something has been accomplished. Last year two freshmen were dismissed from the college and will never graduate from a Canadian or American Dental College. Any man no matter in what year he may be will be similarly dealt with if found guilty of taking instruments which do not belong to him. With these odds against one it is hardly worth while. This years' Freshman Class has appointed a man in each row of lockers to bring any culprit to task. As nearly all the freshmen have the complete equipment of instruments conditions are probably somewhat better than in the other classes. Perhaps the lack of procuring all the instruments on the list by every student has been the greatest factor in the past in inducing borrowing and lending and consequent loss of instruments.

Perhaps it is not by real dishonesty that articles are not restored to their proper owner but the element of carelessness must also be considered. An instrument may be left where the owner was working and the finder does not know to whom it belongs, but even he is culpable if he does not place a notice where it can be seen by all members of the class. In some colleges all instruments are engraved with the initial of the owner. All instruments should have either the initial and year of the owner or some other distinguishing mark by which it may be recognized. The college authorities should see that this or some similar system is adopted by which the instruments of one man may be distinguished from those of another. Until some such method is devised the evil will continue unabated.

This issue of HYA YAKA is the first of the new term. The willingness with which the members of the staff have performed their duties during the past term and the enthusiasm shown have been most gratifying. To these and to all others who have assisted in the production of our magazine the editor wishes to express his sincere thanks.

Note and Comment

For some time class pins was the thrilling topic in the freshman class and the controversy caused by them was so severe that there was imminent danger of splitting the class into factions. The matter has been peacefully adjusted and the pins which have been chosen are exceedingly neat.

Three stalwart seniors were seen one Sunday recently out walking and each carried a cane. Each of these gentlemen appeared in excellent physical condition when last seen at the R.C.D.S. and none showed any signs of lameness.

The installation of the X-ray machine on the infirmary floor is a commendable move. When each student procures one of the new sterilizers, there will be no necessity of a room for sterilization thus providing space for the X-ray apparatus.

The Dean is very familiar with some of the members of class '19. He even walks arm in arm with them to the office.

Class '19 have now completed dissection. This subject has been a source of dissatisfaction all term and the completion of it has been looked forward to with great pleasure.

We are pleased to note that several members of class '19 are always present on Monday and Thursday mornings. Probably the presence of the Dean has something to do with their appearance.

The Dean is greatly in favour of a course in English for Dental students, probably reading the HYA YAKA would help the students out considerably.

The plan of allowing students free access to the books in the college library is a step in advance. The student after reading the book does not return it to the shelf but leaves it lying on the table. We hope no books will mysteriously disappear from the library. Books are not to be taken away unless the regular card is filled out at the office.

The summer course may become a permanent feature of the R.C.D.S.

The editor will be pleased to receive any criticism of our magazine, or any suggestions for a better college journal.

Beginning with this issue a "Question and Answers" column has been opened. This is for the use of all undergraduates who have any questions relating to any branch of dentistry to ask. These will be submitted to the head of the department under which they come, and the answers published the following month. Write the question upon a piece of paper and either hand to one of the staff or place under the HYA YAKA room door.

The HYA YAKA Staff are pleased to note that so many students read the "Useful Hints" published each month. A recent issue contained one advising the use of an old catalogue or magazine to keep the bench clean when pouring impressions, etc. HYA YAKA seems to fill the requirements very nicely, judging from the number used for this purpose.

Two of the younger members of class 1T9 have decided to change their profession. One would like to share his position with a parson while the other wishes to go into the biscuit and confectionery business and seems to give Mooney's the preference.

From the way the Sophomores joined the Skating Club it would appear that Varsity Rink will be frequented by a goodly number of the class.

The Junior class are all back again and as ever though few in numbers are full of ideals.

Rumor has it that some of the sophomores are to occupy part of the spacious Junior laboratory. Some of the seniors who are in the habit of using the lab. will doubtless be forced to find a more secluded place.

On account of the absence of a number of Juniors on January 8, the prosthetics examination had to be postponed for two weeks.

Personals

Dr. Capon who at one time held the chair of Crown and Bridge work was a recent visitor.

Lieut. H. L. Smith was around renewing acquaintances.

Dr. Ottolengui of New York was one of our distinguished visitors recently while in the city for the Toronto Dental Society.

We regret that Dr. T. W. Dawson has found it necessary to sever his connection with the college. Dr. Dawson's private practice has become so large that he finds it necessary to devote his entire time to it. We are extremely sorry to lose such a competent clinician as Dr. Dawson.

Dr. R. D. Wallace spent a few days in the city recently. Dr. Wallace is at present practising in Uxbridge.

Dr. E. F. Whaley was a recent visitor.

Sgts. E. S. McBride and F. H. Barry have recently returned from the front. Sgt. McBride expects to resume his course in the fall. Sgt. Barry has joined the Junior class.

Sgt. A. Walton of class '17 has been transferred from the Army Medical Corps to the C.A.D.C.

We extend our sympathies to P. L. Nesbitt in his recent bereavement. "Nebby" has completely recovered from his recent operation and is again in the infirmary.

Messrs. H. C. Roos and H. J. Murphy are to be congratulated upon the splendid issue of the directory recently distributed to the students.

We are pleased to add so many new names to our active service roll. The number increases each month.

HYA YAKA offers its heartiest congratulations to Drs. H. K. Box and W. E. Cummer in their success in the Can. Dental Research Competition. Dr. Box was awarded first prize, while Dr. Cummer received third.

Dr. Glen Pilkie '16 has recovered from his recent illness and was able to visit the college again.

It looks more natural around the college to see Dr. Walter Willmott with us again.

Three new demonstrators have been added to the infirmary staff. Drs. Wickett and Kruger are present in the morning while Dr. Burgess is present in the afternoon.

A short time ago, another member of class '19 answered the "call to arms" in the person of I. C. Mallough. He enlisted in the C.A.M.C.

We are pleased to see "Jimmie" Stewart around again after being laid up with an injured foot. His foot was cut in the instep during the first hockey practice, but we hope he'll soon be able to chase the puck in his usual good style.

Marriages

CROCKETT—BRANDON—The marriage of Lucille Eleanor, second daughter of Mrs. H. Brandon, South Parkdale, to Dr. J. R. Crockett '16, Lieut. in the C.A.D.C., son of Mrs. H. Crockett, Vancouver, took place quietly on December 23, 1916. The Rev. W. Hardy Andrews, M.A., brother-in-law of the bride, performed the ceremony. The bride wore a gown of blue and gold chiffon taffeta, with corsage bouquet of American Beauty roses. After a dainty supper the happy couple left for Montreal, the bride travelling in navy blue French serge, black and white toque and Persian lamb coat.

The best wishes of HYA YAKA are extended to the happy couple.

LINDSAY—BRADSHAW—The home of Mr. and Mrs. W. G. Bradshaw, Kingston, was the scene of a quiet wedding on New Years' night when their only daughter, Myrtle Edna, was united in marriage to William Vernon Lindsay '20, second son of R. J. Lindsay of Sydenham. The ceremony was performed promptly at 8 o'clock by the Rev. G. S. Clendennen in the presence of a few immediate relatives and guests. After partaking of the wedding breakfast the happy couple left Kingston amid the good wishes of their friends to visit Toronto and other cities.

Vernon is a popular member of the freshman class. HYA YAKA joins with the class in extending heartiest congratulations to the couple and wishes them a happy and prosperous future.

I DON'T.

My parents told me not to smoke,

I don't—

Or listen to a naughty joke,

I don't.

They made it clear I must not wink

At pretty girls or even think

About intoxicating drink.

I don't.

To dance or flirt is very wrong,

I don't.

Wild youths like women, wine and song,

I don't.

I kiss no girls, not even one,

I do not know how it is done,

You wouldn't think I have much fun.

I don't.

STERLING MACAULEY.

Third Informal Dance

THE third informal dance of the season was held on Friday evening, December 15th in the Assembly Hall of the College, and owing to the earnest co-operation of the "At-Home" Committee and the splendid turn-out of students was a decided success.

About 150 tripped to the strains from Filby's orchestra. The music was divine and a great deal of praise is due the orchestra for the fine selection of pieces and liberal encores.

Mr. and Mrs. Wilson were present to chaperon the dance which they did in a satisfactory manner.

Again, the most unique feature on the programme was the "moonlight" waltz, which, needless to say was much enjoyed by all. For this important event the lights were all turned off, the moon was allowed the full privilege of shedding its beams upon the merry throng without any assistance from the other clusters.

Among the ladies present were: The Misses B. E. Shannon, Nettleton, Dorothy Rowland, M. Blanchard, E. Whiteley, Preston, Kerr, Brown, Edgington, Kirke, Vera Urquhart, M. Elliott, Snyder, Lena Hall, Nugent, M. Long, Good, Betty Brown, M. Lullock, E. McHae, H. Morris, H. D. Parsons, Grace Herrington, Carmichael, Marion Percival, V. Hagerman, M. Slater, M. Clark, E. Kohler, I. James, McLachlan, V. Erz, M. Miller, C. Kerr, Grisdale, Steed, D'Exteere, Mohart, Spencer, Watson, Margaret Roe, Elgee, Mrs. Wilson, Long, Booth, Marjory Milne, Brady, Ruth Prentice, G. Halpert, B. Weis, Ethel Ward, Broadfoot.

The gentlemen present were: Messrs. J. A. Plunkett, I. W. Dunbar, A. S. Fauman, S. Perlman, F. Bell, W. R. Barkley, H. D. Leuty, K. McDowell, G. A. Lee, M. Wilson, D. G. Scott, O. H. Bertrand, Guy Murray, N. Webster, R. A. Hart, J. F. Docherty, H. Maranda, T. Ingram, Dr. R. W. Hoffman, R. Gilbert, C. R. Oke, R. Wood, R. D. Shortreed, W. J. Cooper, R. M. Clark, M. Lamey, J. B. Long, M. Seymour, D. Young, F. Babcock, H. G. Brownlee, Louis Staples, S. A. Moore, A. B. Babcock, G. H. Dickson, W. V. Lindsay, H. H. Halloran, E. Harris, J. G. Montgomery, A. M. Calvin, E. T. Carrothers, Dr. E. R. Bier, H. W. Hogg, E. J. Mahoney, J. Pickard, T. D. Lewis, D. L. Kinzie, M. G. Buck, K. Berry, R. J. Montgomery, C. H. Fulford, H. W. Reid, Chas. Clement, H. J. Murphy.

Well-known Dentists Address

SENIOR CLASS.

DR. OTTOLENGUI, NEW YORK.

THE seniors recently had the privilege of listening to a short address from Dr. Ottolengui, the well known editor of "Items of Interest". His words were along the line of education. While at the college the students should avail themselves of the opportunity to read and learn all they can from the experienced teachers in the various departments. The more we learn before we graduate, the less we shall have to learn afterwards. Even after we graduate, however, we dare not cease to study. In this age of rapid advancement wonderful strides of progress are being made by the various sciences. Operations which seemed quite impossible a few years ago are now performed with the greatest of ease. Dr. Ottolengui stated that after he has been practising for twenty-five years, he finds he must now study Bacteriology and Dental Pathology in order to keep abreast of the times. These are comparatively recent sciences and we must keep continually studying them as well as every other branch of dentistry to be of the greatest service to our fellow men and keep the profession on the high plane which it has now attained.

It is by listening to the leaders of our special walk in life that the students are inspired to do their best work and put forward their greatest energy in the practice of their chosen profession.

DR. F. J. CAPON, TORONTO.

Following Dr. Ottolengui's address, Dr. F. J. Capon, with whom Dr. Ottolengui stayed while in the city, gave the senior class a short address. He stated that he had been associated with Dr. Ottolengui in 1889 when they took microscopic work together. He then turned his attention to the students themselves and said that renown is according to calibre possessed by the man whether in business or professional life. Some men, he remarked, rise higher than others who have the same opportunity because they possess greater calibre.

He then referred to the time when he was professor of Crown and Bridgework in the R.C.D.S., and was sorry when his practice became so large that he was forced to sever his connection with the college.

Mr. G. A. Warburton tells of World Tour

ON December 9th, Mr. G. A. Warburton, chairman of the Committee of One Hundred, addressed the students of the College under direction of the Y.M.C.A. executive. The students gathered in the Assembly Hall at 11.45 a.m. and after a few rousing songs were sung, the speaker was ushered in by Dr. Seccombe, honorary president of the Y.M.C.A. Mr. Warburton's talk was mainly about the world-tour which he has recently completed. He described the three countries, Japan, China and India.

JAPAN.

One of the first impressions on arriving in Yokohama was the cheapness of labour. This was indicated by the absence of machinery. Instead of the large steam shovels used in this country for coaling the steamers, women load the vessels with coal by means of small baskets passed from one to another. The mountains seen from the ships seemed to be covered by green growth, but proved to be well cultivated fields. The population is very dense in the lowlands. A large per cent. of the population lives in the cities in the east. On leaving the boat the two-wheeled jinrikishan, drawn by the Japanese coolie, conveyed him through the narrow crowded streets where passage seemed impossible, as men, women and children thronged the middle of the road as well as on the sidewalks.

The Japanese women are very attractive. The children are most winsome and full of vivacity. They appear to enjoy themselves but are clean and happy. The Japanese have a keen sense of beauty and refinement. They are extremely anxious to create a good impression on foreigners. The railway service is better than any in the North American continent. Their industrial development is greater than any in the world. They have little idea of Christianity.

The city of Tokio is very densely populated; containing about two and a half millions of people. The streets are narrow, the houses small. The size of the rooms in the houses depends upon the number of mats of a standard size covering the floor. While in Tokio, Mr. Warburton was invited to many clubs and luncheons. The Japanese are very attentive in courtesy.

CHINA.

Mr. Warburton then turned his attention to China. The population of China is about 425,000,000. The Chinese idea of government is gained from the United States, from the students whom are sent over to the universities, and who return to be leaders in their own land.

The Boxer rebellion was a turning point in the nation's history. Before the rebellion the nation was one of ancestry worship. Now their face is toward the future. They have, however, no adequate school system. An apparent state of national helplessness exists. Christianity is making great progress.

INDIA.

In speaking of India, Mr. Warburton spoke mainly of the religion of the people—Hinduism. He pointed out that the people had a spiritual conception of God, but this was saturated with idolatry. He pointed out the need for Christianity. In the British colonies, law and order exists, as the British extend a certain amount of freedom to the people.

SECOND CLINIC AT TEMPLE PATTISON'S.

The Seniors received a very interesting talk from Mr. H. Brewster, Jr., of the Ritter Dental Co., on December 14th, on the subject of "Efficiency in Modern Office Equipment" at the Temple Pattison Co.'s. office. Mr. Brewster pointed out some of the features to look for in buying office equipment and showed some of the latest improvements along these lines. The Seniors heartily appreciate the necessity for modern office equipment and thank the Temple Pattison Co., for bringing some of the latest advances in furniture to their notice.

Other papers all remind us
We can make our own sublime,
If our fellow schoolmates send us
Contributions all the time.
Here a little, there a little
Story, fellows, song or jest.
If you want a good school paper,
Each of you must do his best.

Overseas Freshman Class

Of the sixty-four students of the Dental Freshmen class who were physically fit, thirty have volunteered for overseas service. The latter are now busily engaged in the work required of dental sergeants in the military camps. The others will continue the regular course with those who were physically unfit for overseas service.

The laboratory has been equipped with five new vulcanizers and six electric lathes for the benefit of the overseas class.

The special class held a meeting on Thursday, January 4th, and organized their executive, electing the following officers: President, V. C. Long; Vice-President, H. R. T. Richardson; Sec.-Treasurer, H. D. Taylor.

CLINIC AT THE S. S. WHITE CO'S OFFICE.

On Tuesday evening, January 9th, the Senior students were invited by the S. S. White Company to attend a demonstration on an X-Ray machine. The man in charge very kindly explained the entire mechanism of the machine, and also showed a number of beautiful radiographs which he had taken. From the pictures shown it was clearly proved that it is practically impossible to practise dentistry in this enlightened age, intelligently, without the assistance of a Radiograph.

On the whole it was a very helpful and interesting demonstration and was much enjoyed by all who attended. We wish to thank the S. S. White Company for their kind invitation.

CLASS '19 MYSTERY

If Flett could Reid that Dickson Dunbar of his *Hord*, Ott Clemence Wright Barkley to Backus if McLaurin should Crouch and Hyde to Steele Young Saunders Hart? Again . . . McGowan Poyntz out O'Leary would Dodge Hogg if he Drew Brook through the Hall of the Millan over the Moore where a Shortreed fell into the Bell on the Barnby the Dary. . . . Aw! not a sound could Leak out.

Athletics

O.H.A. HOCKEY.

DENTALS 2; 227TH BATTALION 3.

In the opening game of Group II, Senior O.H.A., the fast Dental septette went down to defeat at the hands of the 227th Battalion from Northern Ontario. The game was fast and furious, and several of the Dentals seemed to show the effects of too much Christmas and New Year's turkey, plum pudding, etc., and were far from the condition of the husky soldier team. The supporters had hoped to see Dr. Jerry Laflamme in uniform, but his uniform was a fur coat.

The game was rather slow at the start, but soon livened up. Hodgins got both of the Dentals goals. He was ably assisted by the other members of the team. Especially in the last period, Dentals were the aggressors, often getting clear through the defence, but they couldn't score. The goal-keeper was either a dandy or else a mighty good guesser. They tried very hard to even up the score, but were unlucky in their shots. Milan, on one occasion, stick-handled his way through the entire team only to have his shot blocked by the goal-keeper.

"Doc." Merrick of Riversides gave good satisfaction as referee.

Dentals—Goal, C. Stewart; defence, Box and Sheldon; rover, Hodgins; centre, Milan; wings, J. Stewart and Doyle.

DENTALS 4; 227TH BATTALION 8.

Dentals ran a special sleeper and were accompanied by a number of supporters, including Major Thompson, a good representation from the Senior and Sophomore years, and, last but not least "Buttons" as mascot. Quite a few graduates were present at the game, Drs. Dolson, Bert Box, T. S. Tucker, J. Dores, "Pot" Brown, Mel Robb, Ross Larmour. What the supporters lacked in numbers they made up in noise and enthusiasm.

Before a packed rink 227th Battalion doubled the score on Dentals.

Hamilton rink is an old-fashioned rink, wooden construction, with the greatest height of roof not more than thirty feet from

the ground. Absolutely no means were used to stop the smoking and without exaggeration, before the second period was over, players of one team could not be distinguished from the others, for half the length of the rink.

Dentals started right in to make things interesting. C. Stewart was called upon to make a lot of stops and he was right on the job, the harder they came, the better he seemed to like them. Hodgins went down alone, evaded the defence easily, and put the puck into the corner of the net for the first goal. Captain Mac Sheldon followed suit shortly after, making the second. The soldiers were by no means idle, however, and Stewart hardly had time to have a decent rest. Finally Green slipped through the defence and notched the first goal for 227th. This ended the scoring in this period.

Dentals seemed to be hampered by the small ice space, over-skating the goal on numerous occasions.

In the second period the Dentals seemed to go to pieces temporarily, and before they recovered, 227th had landed three goals. Donnelly and Green combined for the first score, Green shooting the goal. Shortly after the same pair were responsible for another one. Hennessey circled his own net, carried the puck clear to the other end, lost the puck, and recovering it from a scramble, scored another goal. It was a brilliant piece of work and Stewart didn't have a chance to make the stop.

Dentals forward line suddenly came to life, and with the able aid of Sheldon and Box made things hum around 227th goal, but failed to tally.

Immediately after the opening of play in the third quarter, McKinnon scored for 227th, making the score 5-2. Right away Dentals got busy. Milan got a jab in the eye with the butt-end of a stick, which just about closed it. It seemed to be what he was waiting for all night. He sailed into the 227th and by beautiful and clever stick-handling, notched two goals. The big heavy 227th defence seemed to be unable to locate him at all, and he received a great round of applause. Then, for some reason or other, Referee Caldwell seemed to think Milan ought to decorate the penalty bench, and sent him off for apparently no offence at all. This seemed to demoralize the team and 227th ran in three goals in rapid succession. Hennessey, Drury and Green were each responsible for one. Dentals tried hard to pull out of the hole, but could not seem to get going. Doyle was forced to leave the ice

in this period on account of a stiff bdy check into the boards. The teams finished the game with six men a side.

Dentals—Goal, C. Stewart; defence, Box and Sheldon; rover, Hodgins; centre, Milan; wings, J. Stewart and Doyle.

227th Bn.—Goal, Duncan; defence, Donnelly and Hennessey; rover, Drury; centre, Green; wings, McKinnon and Blaney.

Referee—Grew. Caldwell of Barrie.

COMMENT ON THE GAME.

Every man of Dentals worked hard, and Manager Laflamme had nothing but praise for them.

Milan improves every time out and the way he stick-handled through the 227th team time after time was a treat.

J. Stewart is a wicked shot, a very speedy skater, and has the goal keeper worried with his bullet-like shots.

Doyle checked back exceptionally well, and is a very hard worker.

Hodgins and Box were the fastest men on the ice. Box is a terrific skater, clever stick-handler, and has the weight to back himself up.

Captain Mac Sheldon is just as steady as ever, rushes well, and handles his team like a veteran. (We don't mean to say he is old in years!)

Charlie Stewart was the star of the game. His goal tending was the best exhibition the writer has ever seen. His clearing was excellent, and he out-guessed the puck carrier time after time.

Green, Drury and Hennessey were prominent for the 227th, although the whole team was good, with the exception of the left wing, whose shooting was very poor.

"Buttons" made a first-class mascot. He was too good to eat with the rest of the fellows, and went to dinner with Major Thompson. We hope he didn't ask for more than three pieces of pie.

Instead of staying at a Hotel all night, the team and supporters chartered a sleeper, and spent the night in it. Along some time in the morning, the electric call bell started to ring, and kept on for ten minutes or so. Everybody turned out of the berths to see what the trouble was, but one young man who wears brass buttons on his coat, on searching for him, was found to be snoring (?) peacefully, but a further search revealed one of his toes pressed against the electric button. After being subjected to a liberal amount of "Father's Woodshed Remedy", peace and quiet was again restored to the car.

Mirth

"So," said the visitor, "you intend to become a dentist when you grow up."

"Yes, sir," said the youth.

"And why have you decided upon the dental profession?"

"Well, a dentist seems to be the only man that keeps on getting paid whether his work is satisfactory or not."

Reveller '18—"Suppose you get into office and there's a proposition comes up that you know absolutely nothing about. What would you do?"

Crowley '18—"Unlike the men, I think we'd have sense enough not to meddle with it."

Onions are good for the nerves—but what is good for the onions?

Mulvihill '18—"Do you shave for five cents?"

Barber '18—"Yes, one side."

Mulvihill '18—"All right, then shave the outside."

Gilbert '18 (to young patient)—"Why should you brush your teeth before going to bed?"

Patient—"To keep the germs from entering my mouth."

Murphy '18—"My spirit lamp won't burn."

Ryan '17—"Get Maranda to blow his breath on it."

"Never let pleasure interfere with business," is a good maxim for about eight hours of the day.

MacCrae '18, was snoring in class after a strenuous evening skating with the fair sex.

Boyd '18 (peeved because he could not hear the lecture)—"Wake up, you're annoying me by snoring so loud."

Mac—"Who told you I was snoring?"

Boyd '18—"Why I heard you!"

Mac—"Don't believe all you hear."

Few dentists are color blind when money is concerned.

Henderson '18—"Well, Mac, suppose you are sick of goose after Xmas?"

McRae '18—"No, geese never bother me so much as chicken."

Sproule has started 1917 by song. We wonder! Is it a blithe heart or a substance for drowning sorrow?

Henderson '18 (on Monday morning).—Turn back the universe and give me yesterday.

A travelling salesman, newly wed, was "killing two birds with one stone" by taking his bride over his "territory" on a honeymoon trip.

He had boasted of his popularity, particularly at the hotels, to his wife. "My dear", he said at one place, "they not only reserve a room for me, without notice, but, knowing my fondness for honey, they always have a plate of it on my table, even when it is not on the regular bill of fare."

When they entered the dining-room, however, he was much embarrassed to find that for the first time in many months no honey had been placed on the table. Noticing his wife's smile, he turned to the waiter, and said: "Look here, boy, where is my honey"?

The waiter looked embarrassed, and leaning over the bridegroom, he whispered in a tone that could be heard three tables away.

"Why, boss, she don't work here anymore; we has all cullud waiters now."

Shortree '19 was sitting out a dance with a charming young woman.

"Do you approve of these new dances—the tango, and fox-trot, for instance?" he asked.

"No, I don't," she replied.

"Why," she exclaimed, "it's really mere hugging set to music."

"Well," questioned "Short", "what is there about that you don't like?"

"The music," replied the fair one.

When love leads the road is easy.

HER OPINION.

Richardson '19—"I wonder why all the old misers we read about are old bachelors."

Mrs. R.—"Oh, married misers are so common that they are not worth mentioning."

Lieut. Broom '18 (cynically).—"Come to sign up, eh? For the separation allowance, I suppose?"

Lindsay '20 (applicant)—"Yes, sir! I wants the separation, and she wants the allowance."

The cat settled herself luxuriously in front of the kitchen range, and began to purr. Little Dolly, who was strange in the way of cats, regarded her with horror.

"O, gran'ma, gran'ma!" she cried, "come here quick, the cat's begun to boil."

A note recently received by a school teacher:—"Dear Miss E., please excuse Mary being away yesterday, as she got her feet wet in the A.M. and took cold in the P.M."

Admirer—"Did the Germans ever leave anything valuable behind them in the trenches."

Chambers '17 (recently returned from the front)—"Never a drop!"

Two men were once talking over their respective sons' careers at R.C.D.S. One remarked, "Well I sometimes feel like saying, as did Aaron in the wilderness 'Behold I poured in the gold and there came out this calf'."

Nesbitt '18 (to small patient age 5 years)—"Evacuate the contents of your oral cavity into the fluid receptacle at your side."

Mother (to mystified child)—"Spit, Johnny, spit!"

The boy stood on the burning deck;
His brain was in a whirl;
His eyes and mouth were full of hair,
His arms were full of girl.

A PAINFUL WRENCH.

Every time a stingy man is forced to give up a big round dollar he imagines that he is in a dentist's chair having teeth pulled.

"How is your papa, Bessie?" asked a neighbor of a little girl whose father was ill.

"Oh, he's improvin' awfully!" answered Bessie. "The doctor is givin' him epidemic injunctions every day."

Life is a joke to the girl with good teeth.

Landlady—You say the chicken soup isn't good? Why, I told the cook how to make it. Perhaps she didn't catch the idea.

Mum '20—No; I think it was the chicken she didn't catch.

A dentist need not be blue and melancholy just because he is always looking down in the mouth.

Patient—"What are you treating me for, doctor?"

Dentist—"Loss of memory—you have owed me a bill of \$25 for over two years.

A dentist need not be a society man to meet "swell" people.

A minister reading the text—on the loaves and fishes, got it slightly twisted, saying that 10,000 loaves and fishes fed 12 people. Looking down to see if the mistake was noticed he caught Pat's eye in front seat, who said:

"Huh! Sure that's easy."

On the next Sunday he gave the same text—correcting his mistake. Looking down, he says to pat:

"Well! Do you think you could do that, Pat?"

"Sure!" says Pat.

"How?" says the minister.

"Use what you had left over from last Sunday."

Patient—"And if I have gas I shan't feel nothing?"

Perlman '17—"Nothing whatever."

Patient—"And I shan't know what you're doing?"

Perlman '17—"You won't know anything."

Patient—"Well, just wait a minute till I count my money."

If the Sophomore class is to occupy part of the Junior laboratory, the Juniors make the following requests:

1. That they refrain from blowing out the electric lights but ask Schaeffer to turn them out.
2. That they lend freely and with no thought of receiving back.
3. That they ask permission of the Juniors before leaving the room.
4. That they refrain from the abominable habit of chewing gum while at work.
5. That, should they receive any attention from the fair sex they must ask advice from a number of said class before proceeding further.

BOARDING HOUSE GEOMETRY

A pie may be produced any number of times.

A landlady can be reduced to her lowest terms by a series of propositions.

A bee line may be made from any boarding house to any other boarding house.

The clothes of a boarding house bed, though produced ever so far both ways, will not meet.

Any two meals at a boarding house are together less than one square meal.

If, from the opposite ends of a boarding house a line be drawn passing throughout all the rooms in turn, then the stovepipe which warms the boarders will lie without that line.

On the same bill and on the same side of it, there should be two charges for the same thing.

If there be two boarders on the same flat, and the amount of side of one be equal to the amount of side of the other, each to each, and the wrangle between one boarder and the landlady be equal to the wrangle between the landlady and the other, then shall the weekly bills of the two boarders be equal also, each to the greater. Then the other bill is less than it might have been which is absurd.

Questions and Answers

Q.—If a pulp is still vital after one application of arsenic when would a second application of arsenic be indicated and when contraindicated, or when would phenol be *used* to complete the removal of the pulp.—R. A. G.

A.—If the pulp is sufficiently vital after the first application of arsenic, a second application may be made. But if you decide to make a second application, do not destroy the continuity of the pulp, *i.e.*, do not remit part of it. If pulp is sufficiently devitalized and part of it has been destroyed in opening into the pulp chamber, thoroughly remove at this sitting, using phenol and pressure anesthesia to desensitize.—A. D. A. MASON, D.D.S.

Q.—What causes a line of red on the pink gum of a denture after vulcanization?—H. L. F.

A.—Not flashed properly. No exception to this rule. “All the wax to be replaced by pink rubber should be in one part of the flask”. Never pack pink in both portions of the flask.—W. E. WILLMOTT, D.D.S.

Q.—Will an upper denture fit better after being in the mouth for a day or so?—H. L. F.

A.—In many cases *yes*. In some cases *no*. If powdered gum Tragacouth be dusted over palatal surface, it will assist adhesion until the tissues become more adapted to the denture. When no improvement in a day, then decide Technic has been faulty.—W. E. WILLMOTT, D.D.S.

“Whichever way
The wind doth blow,
Some heart is glad
To have it so;
Then blow it east,
Or blow it west,
The wind that blows,
That wind is best.”

Useful Hints

CLEANING GLASS.—If the fountain cuspidor or other office glassware becomes coated with a white deposit from hard water, a few drops of nitric acid will dissolve the coating and leave the glass sparkling and bright. The acid may be easily applied with a pellet of cotton held in tweezers.—*Western Dental Journal.*

TO CLEAN VULCANITE FILES.—Apply chloroform and clean with stiff brush. This will remove all the rubber packed in trimming plates.—*Dental Hints.*

TO REMOVE MODEL FROM ARTICULATOR.—Wet your articulator before knocking off plaster, and you will not bend or break the metal. The plaster can easily be jarred loose.—*Dental Digest.*

TO REMOVE IMPRESSION COMPOUND FROM PLASTIC IMPRESSION.—Soften the compound in hot water and hold it under stream of cold water for a second, then the compound will separate without leaving the least vestige adhering to plaster.

STAPLES FOR HOLDING WAX MODELS TOGETHER.—A box of paper clips bought at a stationery store may be bent in a moment and make a very neat staple for stapling wax models together in the mouth.

USE FOR OLD WAX.—Save your scrap wax and melt in a jar with water, then let it cool till the wax is not quite hard and remove from jar by running a spatula around the edge. Scrape the under surface of the wax and cut into strips for dropping purposes in waxing up.—J. H. D.

INVESTING AN INLAY.—When investing an inlay if you have not a fine brush for the purpose of pointing the wax impression, with a wax spatula or other small instrument put a small bit of a creamy investment on it and blow the investment so as to get it to cover the detail parts of the inlay and finish the investment in the ordinary way.—J. H. D.

EMERGENCY REPAIR OF A BROKEN VALCANITE DENTURE.—A temporary emergency repair of a broken vulcanite denture, to tide the patient over until it is convenient to repair it properly, may be effected in the following manner. With a small rosehead pin in the engine a row of holes is drilled each side of the break, one-eighth of an inch apart, and one-eighth of an inch from edge of fracture. The two pieces are then laced together with waxed floss silk.

To PREVENT FILM ON MOUTH-MIRROR.—Moisten the mirror against the mucous membrane of the cheek before using prevents the formation of a film on the mirror when brought in contact with the breath.

To REMOVE VULCANIZED RUBBER FROM TEETH.—Inserting teeth into nitric acid completely removes all vulcanite.

MATCHING TEETH IN THE MOUTH.—Holding mouth mirror behind guide tooth and artificial tooth in place allows better comparison.

POLISHING ARTIFICIAL DENTURES.—After filing and scraping a vulcanite plate, instead of using sandpaper, mix one part emery powder to three parts pumice and use for finishing, affords considerable economy in time.

To CARBONIZE DIES.—Wrap absorbent cotton on toothpick and dip into oil of cloves. Ignite and hold beneath surface of die to be carbonized.

PROTECTING NEWLY MADE CEMENT FILLINGS.—A mixture of paraffin and resin affords good protection to newly inserted cement fillings and greatly enhances the density of its surface.

To REMOVE LINEN ON OLD RUBBER.—Old rubber which has become stuck to the linen may be removed by placing in cold water for a few minutes.—J. H. D.

To KEEP PAN CLEAN WHEN SOFTENING COMPOUND.—When softening impression compound if a piece of rubber dam is placed in the dish it prevents the compound from sticking to the bottom and does not fall to pieces when it gets wet like paper does.—J. H. D.

HYA YAKA

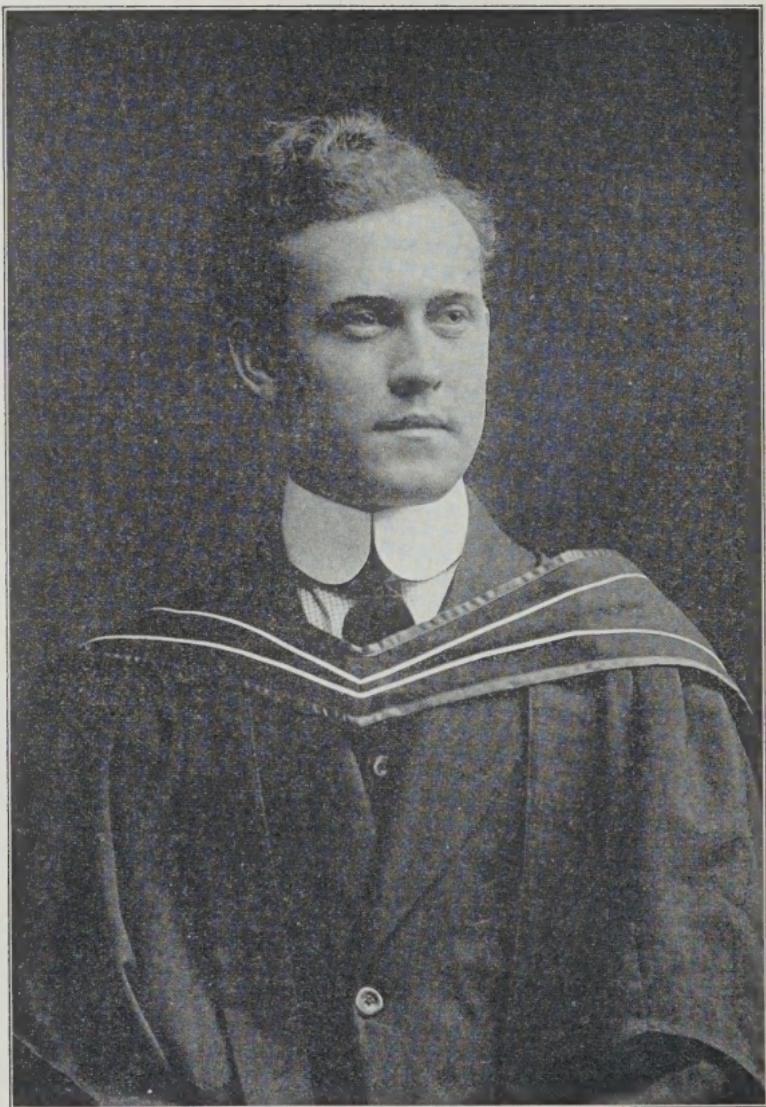
CONTENTS

VOL. XVI.

FEBRUARY, 1917.

No. 5.

	PAGE
Harold K. Box, D.D.S., L.D.S.	<i>Frontispiece</i>
Active Service Roll.....	183
The Casting of Gold Inlays. I. H. Ante, D.D.S.	187
American Institute of Dental Teachers. R. D. Thornton, D.D.S.	189
Nineteen Months in the C.A.D.C. F. H. Barry '18	191
Homeopathy Applied to Dentistry. N. B. Temple '18	194
Questions and Answers.....	195
The Puck.....	196
Anatomy Notes of a Freshman.....	197
Correspondence—Letter of Appreciation.....	198
In and Out	199
Editorials.....	201
Note and Comment.....	203
Personals.....	204
Annual At-Home.....	206
Dr. Jas. P. Ruyl addresses Students.....	207
Patriotic and Red Cross Fund. E. J. Robb '17.....	208
Athletics.....	209
Mirth.....	215
Useful Hints.....	217



DR. HAROLD K. BOX,
Associate Professor of Pathology, R.C.D.S., winner of first prize, Canadian Dental
Research Essay Competition.

THE HYA YAKA

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C. C. Ramage, C.A.M.C.	

†Acting Director of Dental Services, address Ottawa. *Lieutenants rank as Captains while overseas. C.A.D.C. overseas address—Care Director Dental Services, Canadian Contingents, 23 Earls Ave., Folkestone, England.

‡ Wounded.

Practical Hints on the Casting of Gold Inlays

IRWIN H. ANTE, D.D.S., L.D.S.

INLAY wax being elastic, when pressure is applied in forcing it into the cavity and then releasing the pressure, by reason of its elasticity it has a tendency to resume its normal condition, which causes heavy occlusion and misfit of the inlay.

THE IMPRESSION.

Heat the inlay wax with moist heat, force into the cavity with thumb or finger, instruct patient to close teeth tightly together. Carve off the excess of wax. Heat the wax in the cavity with a syringe full of hot water, also heat the occlusal surface of the wax with a hot instrument. Place a piece of rubber dam (medium thickness) one inch square upon the occlusal surface of the wax; instruct patient to close and go through chewing exercise; carve wax to anatomical form, swab with oil cajeput, insert sprue wire, chill and remove.

INVESTING.

The sprue wire is inserted into the hole of a suitable crucible former. The inlay is coated all over with investment (with the mouth blow off the investment and coat again). The ring is placed over it and filled with investment. Wetting the ring previous to investing and tapping the ring with spatula while investing, facilitates the flow of the investment. When the investment is set sufficiently to cut easily, remove crucible former, and scrape away any excess investment that may cover the ends or sides of the ring. Heat the sprue wire over bunsen for a few seconds and remove. The ring should be held in an inverted position while doing this, to prevent any chips of investment entering the sprue way.

BURNING OUT THE WAX.

Place the investment ring inverted on a gas burner and heat gently over a small flame to commence with until all the moisture has been expelled from the investment (this takes about 20 minutes), then turn the gas on full to burn out the wax (which requires about 30 minutes). When the wax is burning out the surface of the

investment becomes blackened. Until this blackness has disappeared the case is not ready for casting. Should the wax bubble out of the sprue way when first placed on the gas burner, the flame must be lowered, as such bubbling tends to produce a rough surface.

CASTING.

The gold used should be one of those grades specially prepared for casting. Failing this, clean cuttings only should be used and on no account must old metal with solder on it be employed, otherwise a defective cast will result. To ensure a perfect cast, it is necessary to have a surplus of metal equal to that actually required for the inlay itself.

The surplus gold from the casting can be again made use of; this should be re-melted on a charcoal block with equal parts of borax and salt-petre, made into an ingot and thrown while hot into an acid bath of 40% sulphuric acid. The reason for this is that the great heat employed causes oxidation. Particles of investment may also become mixed with it. If the gold is not treated as suggested these foreign particles make the gold hard and may also be forced into the mould and cause an imperfect cast.

Melt the gold slowly with a soft oxidizing flame (small bluish flame). On no account should a luminous flame (yellow flame) be employed, as this would tend to oxidize the gold. The metal should be stirred with a pipe-clay stem or slate-pencil to ensure its perfect fluidity, taking care not to touch the sides of the crucible and especially the mouth of the sprue way. On no account use a steel instrument or piece of wood for this purpose. The proper moment for applying the pressure or casting is when the gold is, as it were, "rolling" in the crucible, "not boiling", and the surface of the metal is quite clear, "no scum". The pressure should be maintained for at least 30 seconds. Allow the case to cool for 10 minutes, then place in water and cut out the investment with a knife. After washing away the investment, heat for a few seconds and plunge into acid bath.

FINISHING AND POLISHING.

Small bubbles may be removed with a sharp knife. Holes may be filled in with high carat solder, gold foil or both. It now only remains to cut or saw off the stem of the surplus metal and polish the inlay.

It should not be forgotten that attention to details, though even apparently trivial ones, is the very essence of success.

American Institute of Dental Teachers

R. D. THORNTON, D.D.S., L.D.S.

DURING the week beginning January 22nd, the American Institute of Dental Teachers held its twenty-fourth annual meeting. It may be interesting to the students of the R.C.D.S. to know what the Institute is and what it strives to accomplish.

In the year 1894, nine Dental Colleges of the United States and the Royal College of Dental Surgeons of Ontario organized for the purpose of discussing and attempting to harmonize their curricula, and for a mutual exchange of ideas in regard to the best methods of teaching dentistry. Year after year, other colleges joined the Institute until in 1915 there were forty-four colleges from the United States and four from Canada. This year, owing to the amalgamation of two of these colleges with others, the total number was reduced to forty-six. Each year, the Executive Committee of the Institute selects, for the place of meeting, some city in which there is a well-equipped dental college. The meeting for 1917 was held in Philadelphia, so that the members might have an opportunity to inspect the new School of Dentistry of the University of Pennsylvania. This college has been so heavily endowed by the Thomas W. Evans Estate that the financial side of the problem did not have to be considered in the erection and equipment of the new building. Every detail about the institution has been worked out with the greatest care and consideration.

The Institute met in the Adelphia Hotel. On Tuesday, January 23rd, morning, afternoon and evening sessions were held. The meetings on Wednesday and Thursday mornings were arranged in sections as follows: Operative Dentistry, Prosthetic Dentistry, Oral Surgery and Radiography, Dental Histology, Materia Medica and Therapeutics, Dental Pathology and Bacteriology. This arrangement made it possible for the members interested in any particular subject to devote more time to the discussion of the methods of teaching their subject. Thursday afternoon, the Chairmen of the various sections reported the results of their meeting to the general meeting. At one o'clock Wednesday, autos arrived at the hotel and conveyed the men to the University of

Pennsylvania. Luncheon was provided at Houston Hall and the remainder of the afternoon was spent in viewing the University buildings, especially the Dental College. At the same time, the ladies of the party were entertained at luncheon by Mrs. and Miss Cryer of Philadelphia, and later by a motor trip through the best residential part of the city. In the evening a banquet was tendered the visiting teachers and ladies at the Hotel Adelphia by the Dental Schools of Philadelphia and the Academy of Stomatology.

In the President's address, special importance was attached to the necessity for post-graduate courses. Several of the colleges have this matter under consideration. A few have already tried them and obtained very satisfactory results. Dr. E. C. Kirk, Philadelphia, advocated by a practical demonstration the application of the motion picture film in teaching dentistry. Dr. Kirk's film was far from being perfect in several minor details, but was presented merely to illustrate the possibilities of this method of teaching. Dr. W. A. Giffen, Detroit, has used a motion picture for some time in illustrating a paper on Prosthetic Dentistry which he has read before many Dental Societies in the United States and Canada. It has been so instructive in this field of teaching that Dr. Kirk has conceived the idea of using it in undergraduate instruction also.

The A.I.D.T. is arranging for the publication of a Dental Dictionary which should prove very helpful in standardizing dental terminology and at the same time, place all dental technical terms with a full and comprehensive explanation, in the most concise and compact form possible.

The R.C.D.S. had one of the largest representations from its faculty of any of the Colleges belonging to the Institute. One returns from such a meeting with renewed energy and ambition and a feeling that the equipment and the course given by the R.C.D.S. rank very high compared with American Colleges.

Life is a leaf of paper white
Whereon each one of us may write
His word or two, and then comes night.

Greatly begin! though thou have time
But for a line, be that sublime—
Not failure, but low aim, is crime.—LOWELL.

Nineteen Months in the C.A.D.C.

F. H. BARRY '18.

It was on the sands of Egypt,
That I first began to see
The life of a British Tommy,
In this war with Germany.

My stay in Dear Old England,
Was a short one; nevertheless
I enjoyed each hour that I was there,
Especially at the mess.

With eager ears one morning,
I heard our orders read;
And there within those orders
The Colonel he had said,
That with No. 5 Canadians
Sgt. Barry would take stand,
And travel far beyond the seas,
To a far off warmer land.

So here in Ancient Cairo,
I now do take my stand,
Beside a dental chair, you see
Captain Sparks is in Command.

He ne'er would pull a tooth,
Unless the gum it is well froze;
For pulling teeth gets on one's nerves,
As everybody knows.

At nine o'clock in the morning,
The doors are opened wide;
And then you'll see the patients
As they slowly march inside.

On the 24th June, 1915, the Canadian Army Dental Corps left Montreal for England. At that time the Dental Corps mustered about one hundred and five strong, comprised of thirty-five officers,

thirty-five N.C.O's. and thirty-five men. After ten days' delightful sail we landed in Plymouth, and from there proceeded to Shorncliffe.

About three weeks' time was spent in drilling and route marching, and finally our laboratory was opened on St. Martin's Plains.

When the Dental Corps was first organized, its main object was to supply each fighting unit and hospital with a dentist and assistants; or wherever else they were needed.

The British authorities saw fit to send three Canadian Hospitals to the Dardanelles to be in readiness for the Canadians who were to proceed to Gallipoli. The sending of the Canadian troops to the far East, however, never materialized, and consequently the three hospitals waited on Imperial troops.

No. 5 Stationary Hospital had been stationed at Shorncliffe, and it fell to their lot to leave for the Mediterranean. They had already with them Captain E. B. Sparks, a Dental Surgeon from Kingston, Ontario, who had gone overseas with them previous to the organizing of the Dental Corps. The Hospital as a whole was made up chiefly of medical students from Queen's University, while the majority of officers had at some time been affiliated to the teaching staff of the same college.

The fact that they were all students tells a story in itself as to the discipline and courteousness of the men, to say nothing of the friendly feeling held by the officers toward the N.C.O's. and men.

The second of August saw us well out to sea and nosing into the Bay of Biscay, which in the opinion of most sailors is the roughest spot on the globe. About two-thirty on the morning of the fourth we passed the mighty Rock of Gibraltar, and during the following day the men emerged from their bunks after three days of fasting and "fish-feeding".

From then on, we had a most delightful trip. On awakening on August 8 we found ourselves lying in the natural harbour of Malta, from there we sailed to Alexandria. Shortly after leaving Malta we were treated to a wonderful sight, namely, "Water-Spouts at Sea".

Alexandria was reached on the eleventh, and we were greeted by the natives in their peculiar boats selling wares of all kinds, chiefly fruits, including many varieties which we had never seen before.

After much delay owing to the slow arrival of our orders, we were sent to Cairo, about one hundred and twenty miles up the Nile. Arriving there about seven p.m. we proceeded to an old school house, but were afterwards ordered to Abbassiah Cavalry Barracks, which were built under the supervision of the late Lord Kitchener, and are recognized to be the finest in the world. They are three stories in height, and are surrounded by balconies on all sides, and have conveniences of all kinds, such as electric lights, domestic water, shower baths, etc.

It was fully three weeks before we were in full operating order, and it was then that we knuckled down to business. Our patients consisted of troops direct from the Dardanelles along with twenty thousand Lowland Scottish troops stationed at Polygon Camp, beside which stands an old camel shed built by Napoleon during his stay in Egypt.

In the mornings, our dental parade has numbered as high as one hundred and six, and it was a case of work from nine to one, and from two to six, seven, eight or nine o'clock or until such time that rest was absolutely needed. After four months this pressure was greatly relieved by the presence of New Zealand Dentists who after enquiring about the C.A.D.C., formed a Dental Corps of their own. While in Egypt we handled about four thousand five hundred dental patients which tended greatly to make up the seven thousand patients in all handled by our hospital and for which the hospital was mentioned in despatches, and was rewarded by the handing out of military crosses. During our eight-month stay in, Cairo, Gallipoli was evacuated and we then received orders to leave for France.

We landed in France at Le Havre and proceeded to Le Treport, where we began a General Hospital known as Number Seven Canadian General. Later on in the fall, we left our tent hospital and took over the hospital which had been founded by the late Dr. Murphy of Chicago, and which was disbanded shortly after his death.

Doc. Dawson will be missed they say,
With that I quite agree—

I miss an aching tooth to-day
I've just had pulled, by gee!

Homeopathy Applied to Dentistry

N. B. TEMPLE '18.

TWO motives suggested the writing of this article: first, to provide some information in regard to another means of aiding certain dental disorders to health; and secondly, to correct some popular fallacies regarding the therapeutics of Homeopathy.

A dictionary definition of Homeopathy is "a system of curing disease by small quantities of those drugs which excite symptoms similar to those of the disease". But for the word small quantities this definition would be correct.

Homeopathy is a system of therapeutics based upon the principle that medicines cure disease according to a fixed law, and this law is "Similibus Curentur" or "like cures like," but not the same cures the same. To illustrate: the drug Belladonna given to a healthy individual will produce certain symptoms, dilated pupils, flushed face, scarlet rash, throbbing carotids and dryness of the throat. In Homeopathic therapeutics, this drug is indicated when a patient presents these symptoms; but should a patient show symptoms of Belladonna poisoning, Belladonna is not indicated to treat such a condition—"like cures like, but not the same cures the same". Again, the administration of Mercury produces a syphilitic like condition, flabby tongue, swollen glands and ulcers in the mouth similar to those peculiar to the specific disease. Hence, according to the above law, it is used in the treatment of Syphilis.

The dose in Homeopathy is simply a question of experience. Small quantities are not necessarily always used, but it was found that following the therapeutic law it was not necessary to employ large doses and that certain drugs which are inert when given in quantities become active when triturated with a milk sugar medium. The drug Silicia (silex or powdered quartz) will do for an example. Ordinarily, this drug produces no symptoms but when "potentized" or diluted becomes active and tends to promote swelling or connective tissue and pus formation.

The man who gives quinine for malaria fever is really practicing Homeopathy, for quinine in a healthy man produces chills characteristic of this fever.

Dentistry being somewhat a mechanical science, the scope of Homeopathic treatment is limited. In order to repair an abscess or to "point" it, Silicia may be used to advantage. If, after the pus has been evacuated, the pocket is slow in healing Hyper. Sulph. is sometimes employed. For pulpitis or "toothache", Aconite will relieve the pain; and for stomatitis, in children, Chamonila will assist, it being understood that all the above drugs must be triturated with milk sugar to the required degree of potency.

Questions and Answers

Q.—When a shell crown which is the abutment of a bridge wears through on the occlusal surface exposing the crown of the tooth underneath, what is the best method of restoration?—G. V. F.

A.—The removal of the crown and repair by soldering is almost invariably indicated. If both of the abutments of the bridge are firmly cemented on and one is a dowel crown or Richmond crown, restoration may be made with a foil filling or gold inlay. If amalgam is used insert only when very stiff and dry—squeeze all excess mercury out.—I. H. Ante, D.D.S.

Q.—What causes the bluish appearance of the mucous membrane around the neck of a tooth which has been bearing a Richmond crown for some time?

A.—There are many reasons. It may be caused by impurities such as copper in the metal used for the posting, or it may be due to the acidity of the oral secretions. The history of the case would have to be taken and the case seen to ascertain the specific cause as no general cause may be given to fit every case.—H. K. Box, D.D.S.

The Puck

Way up on the topmost flat,
Do you hear the freshie band?
The horse-shoe files are on the go,
The noise is simply grand.

All day long they rasp and wail,
From them the sweat doth pour;
And, as they ply their heavy files,
The sawdust strews the floor.

Alas for you, poor freshmen,
You think your work's now done;
Your puck is made, it is quite true,
But your work has just begun.

Deep seated in the rubbery mass,
Each so-called ivory tooth
Must be plugged with precious metals,
We're not kidding, 'tis the truth.

You'll get your gold to stick,
If the Fates are kind to you.
Your inlays may turn out alright,
But they very seldom do.

So wind up the old machine,
And give the string a smack,
Shoot the molten silver through the air
And singe your neighbour's back.

And don't forget the bridges;
Though you may not get on well,
When they're all bunged up with solder
You will think they look quite swell.

And now for the Orthodontia,
They save it till the last;
When you solder up your buccal tubes
You're near the end at last.

And as you hand in your puck,
And heave a mighty sigh,
You think of the hours of ceaseless toil,
The blame thing doth signify.

Anatomy Notes of a Freshman

(With apologies to DR. RISDON.)

BONES.

Bones is the latticework on which the body grows. If you didn't have sum bones, you would be shaped like a custard py. If I didn't have no bones, I wouldn't have so mutch shape as I now have, and I would not have so mutch motion, and teacher would be pleased, but I like to have motion, 'specially in this pay-as-you-enter suit Ma hired for me. Bones gimme motion, because they are somethin' hard for motion to cling to. If I had no bones my brane, lungs, heart, and blood would be lyin' around loose in, me, all mixed up like the readin' mater in a yellow journal, and I would get hurted, but now only my bones get hurted. If my bones wuz stuck together with wire in the right places it would make a skeletum. I am mighty glad my skeletum was put on the inside before I wuz finished, 'cause it looks better there. If my bones wuz on the outside, an' I fell down, I would brake everything in the place. Some animals wear their skeletums on the outside. I'm glad I ain't them animals. Once I went to the sircus and seen a livin' skeletum. He looked like his folks didn't keep house but boarded sum place.

If my bones wuz burned, I should be brittle because it would take all the animal out of me. If I was soaked in acid, I should be limber. Teacher showed me a bone that had been soaked and I could bend it. I should rather be soaked than burned.

There is a grate menny different kinds of bones. There is the Crazy bone, the Wish bone, the Soup bone, the Trombone, the Bone Spavin and the Back bone. The back bone is—the back bone is sit—the back bone is situ—the back bone is situa—the back bone is sitcher-e-vated just inside the peel on the other side from the front side and is filled with rubber.

The backbone is made of humps, with places in between where the humps is left out. ("See that humps?") When your skates fly out in front, and you sit down on the ice, one end of the backbone is at the lowest side of the head, if it don't punch up thru', and the other end is at the upper side of the ice.

There is another bone called the skull. The skull has humps too. Sometimes there is branes on the inside of the skull.

Bones don't grow solid like the limbs on a tree, 'cause they have joints. Joints is good things to have in bones. There is a good menny kind of joints. They grease themselves and don't squeek. You can move 'cause you have joints. There is a joint that don't seem like a joint. It is in the skull. It has to be there to occupy the branes and let the head out in the mornin' 'cause sum men no more in the mornin' than they did the nite before comin' home in the tox-i-cab.

There is a kind of fish kalled a Shad, that tastes just like a paper of pins. It is all bones except the part they don't cook and throw away.

The bones that hold your lungs in are kalled slats. They run around you East and West, but girls wear bones runnin' North and South.

When bones is ground up fine, they make a good fertilizer. It gives me a lonesome, scattered feelin', and brings tears to my eyes—to think that I might be used on an onion patch.

Sum folks, when living, kill everything they touch, and it would not be safe to use the bones of them kind of people for vegetables.

THAT'S ALL.

Correspondence

LETTER OF APPRECIATION.

The Editor in Chief,

HYA YAKA.

Dear Sir—

I wish, through the columns of our splendid journal the HYA YAKA, to express my thanks and sincere appreciation to the members of the senior class for the kind thought which prompted the sending of the beautiful flowers during my recent illness.

I should be remiss in courtesy and very sincere feeling were I to omit a reference to the kind words of sympathy and encouragement extended to me by different members of the faculty and class in my bereavement.

Yours gratefully,

P. L. NESBITT.

In and Out

N. B. T.

In his office small, he sat and read
The lives of great men long since dead.
Distant rumbles from far away
Announced a storm, a dismal day.
The door latch clicked and there walked in
A man with bandages round his chin.
He was in pain one glance would show.
His face was flushed, his stagger slow.

“Quick, doctor, quick” he cried in pain.
“Extract this tooth in heaven’s name.
For nights and days I’ve been awake.
Prepare at once. Gas I will take”.
The chair adjustments took but a flash,
And the thunder echoed a deafening crash.
The lightning quick lit up the room
As bright as sunlight at high noon.

Everything is ready, the nose cap’s on.
“Breathe through your nose” the old sing song.
“Fear not; I’ll hurry, don’t hamper me.
That tooth I’ll get in one jiffy”.
The handle’s turned, swish, the bags are full.
“Steady now, one twist luxate and a pull,
And out it will come, you’ll be out of your pain,
And to-night you’ll sleep contented again.

He breathed through his nose, afraid? Not he,
His forefathers came from Miramichi,
And rolled logs down the mountain side,
And with sturdy oars fought against the tide.
He is sinking now, his face is red,
A dull ringing is in his head.
Like Hercules when on Lethe’s brink,
He lay him down and long did drink.

Sensation’s gone, and now once more
He’s with his sires on Miramichi’s shore.
And redskins fighting in days gone by,
When courier-du-bois their trade did ply.

Two Indians have him by the throat,
He cannot utter a single note.
They tackle high and down they go,
Redskins above, he below.

A fractured rib sticks in his lung,
The enemy strove to wrench out his tongue.
It is indeed a sorry plight,
He struggles now with all his might.
Feet, fists, and teeth he tries in vain,
To free himself from the fiendish twain.
His strength is failing, he'll sink anon
Into deep oblivion.

And then he awoke upon the floor.
The dentist is standing near the door.
Upon his face is a sickly grin,
Dolor and pallor mingled in.
His eye is cut, one tooth stove in,
His left hand gently rubs his shin;
But in his right hand held aloof,
He brandishes forth the offending tooth.



DR. W. E. CUMMER, D.D.S.
*Prof. of Prosthetic Dentistry,
R.C.D.S.*
Winner of third prize in the
Canadian Dental Research
Essay Competition.

TWO FACULTY MEMBERS WINNERS.

It is a matter of no small comment that two of the members of the faculty of the R.C.D.S. should be so successful in the recent Canadian Dental Research Essay Competition. Dr. H. K. Box, whose photograph we reproduce on the frontispiece, captured first prize, while Dr. W. E. Cummer received third. Dr. Box's recent discoveries along pathological lines have placed him prominently before the dental profession, while Dr. Cummer's work as a prosthodontist has gained for him a reputation as an authority upon this subject. Dr. Garvin of Winnipeg was the winner of the second prize.

THE HYA YAKA

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BY THE STUDENTS OF THE ROYAL COLLEGE OF
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No. 5.

Editorials

PRACTICAL PREVENTION.

PERHAPS no more potent problem is before the dental profession to-day than that of prevention of dental disease.

In the past, too much theorizing has been indulged in with too little practical application to corroborate the theory. The only reliable information along the lines of prevention has come from individual research men who have given their attention to the practical side of the problem. Insufficient work has as yet been done to solve a problem of such magnitude. Greater co-operation is necessary. The dental college offers the best equipment for the solution of such problems. A competent man should be engaged to spend certain hours each day to direct the work and to obtain the co-operation of other men in the College and also enlist the interest of the student.

The R.C.D.S. has adopted the method of accumulating statistics from infirmary patients who show a tendency to marked susceptibility or immunity. Attributing factors such as habits, character of food, etc., are recorded and when sufficient records have been made some conclusions may be drawn from the data. The statistics are gathered by the students and at best are not so reliable as would be gathered by one man working entirely along these lines. Prevention is the key to the eradication of dental

disease, and the sooner the co-operation of the members of the profession can be secured, the sooner will dentistry become a preventive rather than a restorative science.

DENTAL EDUCATION.

The acquirement of a general dental education is a gradual process. Many factors contribute to its acquisition. By far the greatest part is played by the Dental College. Here, the ideal as well as fundamental principles in professional practice are learned. Many students are under the impression that when graduation time comes it brings with it a time for cessation of study. They realize soon afterwards, however, that it has been truly named "Commencement" and that constant study is necessary to keep apace with modern professional advancement. The most potent educational influences after graduation are the dental society, the dental journal and the dental library. These latter means are optional. In the dental society the most recent discoveries and methods are brought before the members by leaders in the profession. Much is learned by contact and discussion with fellow-practitioners. The journal, too, is an instructive feature, as it aids the members of the dental society to obtain a firmer grasp of the proceedings by further study. It carries the proceedings to those unable to be present. Another consideration in the furthering of the dental education is the library. The journal bound for future reference may form a part of the library. The newest texts upon dental subjects should also be at hand for study and reference. It is only by availing oneself of every opportunity that a thorough dental knowledge may be obtained.

The hours I spent with thee, dear heart,
How happily they went!

I wish they were the only thing
On thee I'd ever spent.—S. W. S. '18.

Everything comes to those who wait,
And the lazy man waits to greet it;
But success comes on with rapid gait
To the fellow who goes to meet it.

Note and Comment

A stately young gentleman of class '19 lost his skates on a St. Clair car recently, broke a valuable victrola record and made a fifteen dollar night out of a skating party.

The basketball scores are seldom mentioned around class '19, especially when the team plays Sr. Meds.

One of the members of the recently departed Military Sergeants Class may be rejected as physically unfit. He swallowed a large gold inlay recently. Let it be a lesson for more thorough mastication!

The new Sergeants class seems to have some material for good dentists in it. We hope their service at the front will tend to develop them into even better dentists.

The outlook for the possibility of seniors being drafted into the dental corps is none too bright.

The juniors took a week's vacation recently to prepare for exams. They have succeeded in writing off two or three final papers.

The new lockers for the individual sterilizers add to the appearance of the infirmary.

Colvin '18—Why do you take life so seriously, Wood?

Wood '18—Well, there's no reason why I shouldn't. Taking life is a serious matter.

Strathern '18 (at the phone)—"Hello, this is the Dental College speaking."

Davis '18 (Broom '18)—Is there any law which forbids the alcohol thermometer from taking a little drop since September 16?

Personals

Those who attended the meeting of the Institute of Dental Pedagogics were, The Dean and Mrs. Webster, Dr. and Mrs. W. E. Willmott, Dr. and Mrs. A. J. McDonagh, Dr. and Mrs. B. O. Fife, Dr. and Mrs. R. D. Thornton, Drs. J. W. Coram, G. H. Coram, H. K. Box, I. H. Ante, J. A. Bothwell, C. A. Kennedy, W. C. Smith and E. F. Risdon.

Dr. John Craig of Bowmanville visited the college recently.

Lieut. "Dick" Sheeby was around in his new uniform.

Dr. Tom Hatt of Medicine Hat was renewing acquaintances in his Alma Mater.

Dr. Frank Wright of '15 graced the college with his presence recently.

Lieut. R. Crockett, late of Hamilton, has secured an appointment in the C.A.D.C.

Capt. E. R. Zimmerman '15 was around looking up old friends.

Dr. D. M. Boyd, who is practicing in Rainy River, paid the college a visit recently.

We are pleased to see Jack Lebetter around again after a serious operation.

Since joining the C.A.D.C., Dodge '19 has been taken ill with measles and is in the isolation hospital.

J. H. Strath '19 on account of ill health finds it impossible to continue his course and intends going south.

Jimmie Stewart '19 who has been laid up with a sore knee is able to be around again.

We regret to learn that Capt. J. R. Duff has been wounded.

Capt. E. F. Risdon has left for overseas service in the C.A.M.C.

Miss Hodgson has been added to the infirmary staff.

Marriages

CLARK—TUTTON—A very quiet weddding was solemnized in College Street Presbyterian Church on January 4th, 1917, when Miss Frances Tutton of Toronto was united in the solemn bonds of matrimony to Dr. E. H. Clark of Minedosa, Man.

The bride looked charming in a gown of blue silk trimmed with crepe-de-chene with a beautiful bouquet of violets and roses.

After a dainty luncheon the happy couple left for a short honeymoon, after which they will reside in Minedosa.

The HYA YAKA extends its best wishes to the happy couple.

HILL—HARRISON—On December 28th occurred the marriage of Miss Harrison, formerly of the infirmary staff, to Dr. A. N. Hill of Dundas. The bride was attended by her sister.

The couple enjoyed a short wedding tour to Buffalo and other American cities. Every good wish is extended the young couple.

A NEW SORT OF HAM

Two Scotswomen met in a country road, near P. One of them was carrying a queer looking parcel and the other asked what was in it. "Oh, it is just some ham," was the reply; "I always buy my ham from Mr. Sandy's shop in P. My husband is rather particular and he likes Sandy's ham."

The other Scotswoman said her husband was rather particular, and she thought she might try some of the same ham, so she went off to Sandy's shop in P.

"I want some ham," she said. "What kind of ham?" the shopman asked her. "Oh, the same kind of ham that Mrs. So-and-So gets."

Sandy smiled quietly, and leaning over the counter he whispered, "Where's your bottle?"

Annual At-Home

THE greatest social event of the season was the Annual At-Home of the Royal College of Dental Surgeons held on February 2nd, 1917, in the beautiful rooms of the Metropolitan Assembly Hall, which were tastefully decorated with palms and flowers. The walls were dotted here and there with various college pictures and pennants of the different faculties. Strathdee's popular orchestra thrilled the fantastic dancers, and the function was one that will be long remembered by those present as one of the most successful At-Homes in the history of the College.

A light luncheon was served at 12 p.m., after which dancing was resumed until about 3 o'clock.

Those receiving were Mrs. Wallace Seccombe, amethyst velvet trimmed with lace of silver; Mrs. W. E. Cummer, rose satin with gold lace; Dr. Wallace Seccombe and Mr. H. J. Murphy, chairman of the "At-Home" Committee.

Among those present were:

Ladies—Misses I. James, Olga Brown, Tufford, E. Girdler, H. Score, Mrs. W. V. Lindsay, Misses Russel, M. Broadfoot, Marjory Milne, V. Urquhart, Coullcutin, J. Dyment, Marion Reynolds, Dorothy Reburn, J. Milne, M. Muat, M. Tulloch, E. Ireland, B. Reid, Roland, Rutherford, Stone, E. Murphy, V. Taylor, M. McDonald, Blanchard, A. Gardiner, Grace Harrington, Gibbs, Peppeath, Curran, Wilkins, Senim, Reid, Squire, Bean, Sterling, Dryer, Malande, Bothwell, McGrath, Marie Halloran, Smythe, Gwen Johnston, Thomas, Ottan, Fenn, Trace.

Gentlemen—F. E. Babcock, A. Palmer, S. James, Lieut. W. Sinclair, W. V. Lindsay, V. S. Fournier, J. A. Plunkett, H. D. Leuty, A. Babcock, J. Adams, R. Clark, D. L. Kenzie, K. Berry, Dr. F. M. Deans, J. V. Ross, H. Hogg, S. Sproule, C. W. Staples, J. McDonald, Dr. R. C. Wood, Dr. Wickett, Mr. Heyes, Dr. V. A. McDonagh, Dr. F. Becheley, Messrs. J. McHugh, M. Lamey, A. Gardiner, H. N. Marander, E. T. Ingram, T. Lewis, G. M. Sheldon, J. R. Murray, C. W. Leggett, Lieut. H. Reed, Dr. N. Liberty, F. Cale, N. W. Haynes, A. W. Boyd, B. Temple, Dr. Bothwell, E. S. Hodgins, Mr. Sharp, H. H. Halloran, F. Purdy, C. H. Fulford, Dr. Taylor, J. Revelle, F. Bell, R. Gilbert.

Dr. Jas. P. Ruyl Addresses Students

ON Tuesday, January 23rd, the students of the R.C.D.S. listened to an excellent address by Dr. Jas. P. Ruyl of New York. Dr. Ruyl came to this city at the request of the Toronto Dental Society, to read a paper before that organization. He showed the students some of the lantern slides used to illustrate his paper. Dr. Ruyl has obtained marvellous results from surgical operations in abnormal edentulous mouths before the insertion of dentures. Marked improvement in the facial features was demonstrated in every case. Dr. Ruyl stated that by means of surgical procedure, the resorption in alveolar ridges may be accomplished in from three to six weeks, whereas it would take nature as long as twenty years to produce the resorption. In these abnormal cases, Dr. Ruyl stated that in setting up the teeth, an articular such as the Gysi upon which the occlusal plane is marked must be used, otherwise such successful results will not be obtained. By courtesy of *Oral Health* we hope to publish Dr. Ruyl's paper read at the Toronto Dental Society next issue.

LAUGH IT OFF.

Are you worsted in a fight?

 Laugh it off.

Are you cheated of your right?

 Laugh it off.

Don't make tragedy of trifles,

Don't shoot butterflies with rifles—

 Laugh it off.

Does your work get into kinks?

 Laugh it off.

Are you near all sorts of brinks?

 Laugh it off.

If it's sanity you're after,

There's no recipe like laughter

 Laugh it off.—*Eliot.*

Patriotic and Red Cross Fund

E. J. ROBB '17.

ONCE again the Royal College has shown its patriotism in a tangible way. Two weeks ago when the campaign was launched by the city for the raising of two and a half million dollars for the Patriotic and Red Cross funds, the University set to work to raise its share. The Royal College as a part of the University entered into the campaign with enthusiasm voiced by giving. The final returns showed that we not only stood highest among the faculties of the University but had contributed more than any other two combined. This splendid showing linked up with the fact that so many of our boys are in special training for service overseas shows conclusively that the Royal College of Dental Surgeons is ready to continue her sacrifices until victory for the allies is complete.

The total contributions amounted to \$577, which includes the givings of only a few members of the faculty, many having contributed through other organizations. In fact some whose names appear below were donating for the second time:

Following is the list—

Dr. Willmott.....	\$125.00
Dr. Cummer.....	100.00
Dr. Seccombe.....	100.00
Dr. Paul.....	60.00
Dr. Grieve.....	50.00
Dr. Mason.....	25.00
Dr. Webster.....	10.00
Dr. Thornton.....	10.00
Dr. Boyle.....	10.00
Miss Reid.....	1.00
Miss McLean.....	1.00
Seniors class.....	53.00
Junior class.....	2.00
Freshman.....	6.00
Sophomores.....	24.00

	\$577.00

Athletics

O.H.A. HOCKEY.

DENTS 6; T.R.A.A. 0.

The Dentals blanked the undefeated T.R.A.A. team at the Arena Gardens in their first clash of the season. Owing to their win over the 227th Battalion, the T.R.A.A. seven were favourites, but were outplayed in all stages of the game.

The Dents did everything in the first two periods but secure tallies. They outskated and outplayed their opponents from the beginning but couldn't seem to break in on the score column until just two minutes before the end of the second period, when Hodgins bulged the net for the first score of the game.

In the last session it was six men a side, and then got down to five or less when penalties came fast. Dents seemed to take to it better, playing fewer men, and notched five more goals before the whistle blew, making it 6-0.

The Dents were at top form and will take some beating now that they are away to a good start. Charlie Stewart didn't have a great deal to do but was very much in evidence when called on. Captain Sheldon played his best game this season, and was ably assisted on the defence by Box, who without a doubt was the fastest man on the ice. On the forward line, they showed a new man in Smillie who played a great game all the way. "Jimmie" Stewart played his usual good game, while Milan and Hodgins were always on the job, showing some fine stick handling.

Referee, Oscar Bernhardt.

DENTALS 5; T.R.A.A. 1.

Dentals and T.R.A.A. hooked up for their second game of the season, which was a repetition of their first game, in other words a case of too much Dentals, who won by a score of 5-1.

Dr. Jerry Laflamme made his initial appearance of the season, and although he didn't play a full game, showed the fans enough to make them realize that he will be a hard man to stop when he gets into shape. The Dentals outskated and outplayed their opponents all the way and the result was never in doubt.

The first period ended without a score although the Dentals skated rings around their opponents, but couldn't seem to get one past Crooks, who played a fine game all the way and was responsible for keeping the score down.

Things straightened away in the second period and the Dents ran in three goals. Box got the first goal of the game, going the whole length of the ice, crossing over and fooling the defence. Hodgins secured the second tally on a trip up the side. Humphrey went off and Laflamne went off to even up. Milan scored the third on a nice shot from the side.

The third period was played six men a side. T.R.A.A. scored their only tally in this period while the Dentals netted two more. Smillie and Milan combined for one and Smillie got the other on a rebound. Crooks stopped half a dozen more that looked easy goals.

Referee, Dr. Wood.

DENTALS 14; ST. PATRICKS 3.

The Dents moved up a notch in the O.H.A. race when they defeated St. Patricks at the Arena by a score of 14-3.

The Dents lined up their strongest team of the season, with Jerry Laflamne back on the defence with Sheldon, and Box as rover. Milan, Hodgins and Smillie constituted the forward line. They outclassed their opponents in speed and stick handling and the score tells the tale.

The first period ended 5-1, the second 8-3, while in the last period the winners ran in six goals. Sheldon received a cut over the eye in the second period.

Box and Adams created a little excitement in the last period with a short exhibition of sparring in which Box was by no means shaded. The referee decided to take a hand in the proceedings and banished them for the rest of the game.

Referee, Robert Hewitson.

DENTALS 5; 227TH BATTALION 0.

Dentals handed their nearest rivals in the O.H.A. race, a 5 to 0 defeat right on their own ice and incidentally took the lead for Group honours.

Both teams played brilliant hockey from the start, rushes being made time and again only to be broken up by the defence, until after seven minutes of play when Smillie put the Dentals in the lead with a nice shot.

The second period opened fast, the soldiers doing their utmost to break in on the score sheet, but what little got past the defence was well looked after by Stewart who played a splendid game. Smillie scored the second goal after some nice stick handling. Five minutes later Laflamme carried the puck up and shot and Green in an endeavour to save pushed the puck into his own net.

Dentals outplayed the soldiers in the final period. After some brilliant skating and clever stick handling in evading the defence, Box netted the fourth goal, followed in eight minutes by the final goal on a nice shot by Milan from in front.

Stewart played a brilliant game in goal, while Laflamme and Sheldon uncorked some lightning rushes. Box played his usual good game and was the fastest man on the ice. The forwards combined well and checked back effectively.

Referee, Vanhorn, Kingston.

DENTALS 6; 227TH BATTALION 3.

Dentals defeated the 227th team of Hamilton by 6-3 at the Arena, and by so doing practically won the Group Championship although they have four more games to play.

Play was even for two periods, 1-0 at the end of the first period, 2-2 at the end of the second period, but in the final period Dents got their combination working and ran in four goals to the soldier's one.

The Dentals showed good all round form after they got settled away. Laflamme and Sheldon had them shooting from outside while Charlie Stewart made them all look easy. Box played his usual brilliant game, while Milan, Smillie and Hodgins, in the final period showed some of the prettiest combination seen at the Arena this season.

Referee, Steve Vair.

INTERFACULTY HOCKEY.

Dental College were grouped with St. Michaels College and University College in the Jennings Cup race. Owing to the unsettled condition of the Freshman year, and the small attendance generally, only one team was entered instead of two as last year.

DENTALS 3; ST. MIKES 3.

Dents started in to make things interesting and had a two goal lead before St. Mikes got started. Before the second quarter was

over, however, St. Mikes had tied up the score, the second goal being very lucky. It glanced in off the defence-man's stick. Neither team could break the tie and when full time was called the teams were no further ahead than they were before the game. Captains Cook and Spratt both agreed to postpone the game rather than play it off at the time.

Spratt at centre for St. Mikes was easily the star of the team. For Dents, Staples, Moore, Cook and Mulvihill were best. Winn and Bartholomew of the Freshman year both played good hockey.

DENTS 7; ARTS 3.

Arts having previously beaten St. Mikes, were confident of winning and thereby getting a commanding lead in the Group.

Ross, last year's star centre man, was back in uniform again, and Captain Cook moved over to his old place at right wing. Roos of last year's Juniors was also on the job again.

Dents started out in the lead again and had two goals to the good at the end of the first period.

Arts secured a goal in the second period and then came strong in the last stanza. Good blocking by Staples kept them down to two goals, one of which was very lucky. It was scored from a mix-up at one side of the nets, and glanced in off one of the defence men's skates.

Dents had slipped in another when the Arts defence were having a sleep. When the bell rang for full time, the score was a tie 3 all. After a rest, the teams started again, to play five minutes each way.

Dents came to life with a crash and before the smoke cleared away they had scored four goals.

Arts simply went to pieces, and the Dents quickly took advantage of it. This was the first time this season that the forward line showed up its old last season's form. Their combination was good and their back checking a feature of the game.

The defence men both rushed well, and Staples played a wonderful game in goal.

Robertson was easily the star for Arts, but couldn't do the work all alone.

Line-up—Staples, Moore, Roos (Bartholomew), Cook, Ross, Mulvihill, (Winn), (Smith).

DENTS 4; ST. MIKES 2.

St. Mikes got away to a good start and scored two goals before Dents woke. Then they started in earnest and soon tied the score. The game was very rough and the penalty bench was heavily decorated with players.

Kelly of St. Mikes, although a very useful player, was a detriment to his team by his constant roughing. He seemed to be on the bench for a greater time than on the ice. Dents got the lead in the second period and were never headed. They played the game and stayed on the ice.

One more goal was secured in the last period, and the game ended with Dents ahead two goals, 4-2.

Scott of School handled a very difficult and rough game most satisfactorily. His work was the best seen at Varsity rink this year.

Every Dent man showed up well.

Line-up—Staples, Roos, Moore, Cook, Mulvihill, Ross, Spares, Smith, Winn, Bartholomew.

DENTS 7; ARTS 3.

Dents got down to business early and had a lead of five goals before Arts entered the score column. Dents' combination has improved every game, and was a big feature in running up the score.

Arts got busy in the third quarter, and notched three goals in quick succession and had visions of winning, but Dents came back strongly, and slipped in a couple more.

It is hard to pick any individual stars as every man played his position perfectly.

Staples again starred in goal.

Everybody showed the effects of the previous night's visit to Hamilton with the Senior O.H.A. team.

The captain and manager were very dubious about getting a team at all that night as few of the players were in evidence around the College, but they all turned up, although a couple of them that ought to know better were very late.

We hope that on the next trip they take, they won't wait till they get back to Toronto to get some sleep.

DENTS; ST. MIKE'S DEFAULT.

As Dents couldn't be beaten for the Group Championship and as St. Mikes were absolutely out of the running, they defaulted the play-off of the tie game of the first of the season.

SEMI-FINALS.

Dents, School, Meds and F.O.E. are left in the semi-finals for the cup.

Dents and Meds come together in home and home games, and the winners play off with the winners of the School - F.O.E. series.

The general opinion around hockey circles at the University is that Dents will win out, as their group was picked as the hardest group of the four.

At the time of going to press Dents and Meds are just starting their series, and the reports of the games will appear in next month's issue.

BASKET-BALL.

By losing the third game of the series to Sr. Meds the Dent basket-tossers were put out of the running for the season. Dents were handicapped this game by the absence of several of the players, and had it not been for this fact, a much better game would have resulted. The game against S.P.S. was easy for Dents and Meds were looking for a close game. Perhaps, if a little more interest had been shown by the fellows, Dents would still be in the running. Thanks are due, however, to the men who turned out for practice and for the games.

The new special Sergeants Class number about sixty-five, and are hard at work. On Monday, February 19, the class organized and elected the following officers: President, J. H. Wallace; Vice-President, J. C. Green; Sec.-Treasurer, Galex Gemeroy.

Young lady—"You had no business to kiss me."

Mulvihill '18—"But it wasn't business. It was pleasure."

THE NEW YEAR.

Waste no tears
Upon the blotted record of lost years,
But turn the leaf, and smile, oh, smile, to see
The fair white pages that remain for thee.

—ELLA WHEELER WILCOX.

One example is worth a thousand arguments.—*Gladstone.*

Mirth

Dr. Burgess (to returned soldier)—“I see you've been to the front. I suppose you have gone through something?”

Returned Soldier—“Not much more than I went through just now when Mr. Barber was preparing that cavity!”

Dr. Bright (to Long '18 when taking Orthodontia impression)—“I can't get an impression of your mouth. You will have to go down to the veterinary college.”—Poor Long.

Dean Webster—What is a definition of a dental engine?

Quigley '19—An apparatus for holding burs.

The Dean—Why not use the leg of a woolly trouser?

Lost—A minute. Finder return to Blandin and receive liberal reward.

Lawrie '19—Do you ever smoke cigarettes, Russ?

Russ '19—Yes, sometimes.

Lawrie—Murads?

Russ—Sure.

Laurie—Whenever you smoke them save me the coupons, will you?

QUESTIONS FOR THE SENIORS.

Do you belong to Class '17 or '18? Is your limerick in? Have you bought or rented your sterilizer?

McRae '18 (in recent debate with Freshman for Willmott Shield)—As the Subject has been given I will not *irritate* it.

Winn '20 (in reply)—As the subject has been given I will not *irritate* it.

Sproule '18 (to McLaurin '19)—Say, Mac, did you know I was on the stage?

Mac—No!

Sproule—Yes. Boyd threw my hat up and I went up after it.

Ferguson '19—Say, Dunbar, I have been wanting to tell you something for a week back,

Dunbar '19—What is that?

Ferguson—Sloan's Liniment.

Hogg '19—What race were you speaking of?

Lavine '19—The human race.

Hogg '19—Ha, ha, ha.

Lavine '19—What are you laughing at, you don't belong to it.

Elderly Sister—So Mr. Ryan said I had teeth like pearls. And what did you say?

Kid brother—Oh, nuthin, 'cept you were gradually getting used to 'em.

MASTICATE THE H. C. OF L. OFF THE MAP.

Of war time economy proposed,
We are entirely inclined and disposed,
To accept without fee Dr. Seccombe's decree,
And CHEW, CHEW, CHEW.

Save money on one-third your food,
Two-thirds will be plenty if chewed,
Besides saving the till, you'll avoid dentist's bill,
And SAVE, SAVE, SAVE.

Give credit where credit is due,
The boarder who takes time to chew,
Is considered, preferred, rates reduced by a third,
Now CHEW, CHEW, CHEW.

If you haven't got thirty-two teeth,
You are handicapped in this great feat,
With indigestion you're dazed, your board bill is raised,
And it's STEW, STEW, STEW.

Conserve all your jawbone resource,
Chewing "rag" or gum is waste force,
Save your maxillary power, 'till meal time hour,
Then CHEW, CHEW, CHEW.

—*Evening Telegram.*

Useful Hints

RUBBER CEMENT.—In making repairs where old and new vulcanite are to be united, a rubber cement must be used between the surfaces in order to secure absolute molecular union. Cement may be made in two or three different ways. The most common method is to dissolve pure rubber or soft vulcanite in chloroform, bisulphide of carbon, or benzine, any one of which is a solvent. It is a good plan to keep a small bottle each of red, black and pink chloro-percha in the laboratory and use that colour which corresponds to the base-plate or rubber to be used in making repair.—R. L. D. '18.

TO PREVENT WAX PLATE FROM ADHERING TO MODEL.—Soften the sheet of wax by holding one side only near the flame, do not warm both sides. Then when wax is sufficiently soft, put side which has been farthest from flame against the plaster model, then when wax plate is lifted, it will not adhere to the model. Dusting the model with plaster paris will also help.—L. D. B. '19.

FOR THE PLASTER BENCH.—A piece of plate glass about 6 inches square presents a smooth surface to set a model on and is easily cleaned. Any glazier will cut one from waste pieces for a few cents.

A POINTER FOR FRESHMEN.—Should you scrape a hole in a *new* Plate, repair it in the shape of a half-moon, star, maltese cross, butterfly, or any other design,

REMOVING NICKEL-PLATING.—Before re-plating nickel-plated articles it is often necessary first to remove the remains of the old plating. This is sometimes done by means of a so-called stripping bath. The results of this method are not always satisfactory. The Keystone recommends its mechanical removal by means of a polishing wheel and an abrasive powder whenever it can be done. This leaves the surface in better condition to receive the new deposit.—*Dental Brief*.

METHOD OF RETRACTING THE CHEEK MUSCLES.—In restoring the buccal surfaces of upper or lower molars, difficulties are frequently encountered in keeping the masticatory muscles from interfering with the filling operation. A method which is more comfortable for the patient than a cheek retractor consists in passing a copper or iron wire of suitable size through a cotton roll or rolled dental napkin, and bending it to fit the curvature of the jaw. This simple contrivance will effectually hold the cheek away from the field of operation.

STAINING ARTIFICIAL TEETH TO MATCH NATURAL TEETH.—A most artistic effect can be produced by painting thin lines of porcelain enamel, of suitable shade, longitudinally or transversely across the artificial tooth or teeth and baking in a small electric furnace. Such lines entirely remove the artificial appearance of the tooth or teeth, and from an esthetic point of view leave nothing to be desired.

LIQUID COURT PLASTER.—A good liquid preparation for cuts and bruises that forms a covering like liquid court plaster is made by mixing three-quarters of an ounce of flexible collodion with one-quarter of an ounce of ether. When this solution is applied to cuts it will not wash off. As the ether evaporates, more of it is added to keep the mixture liquid.—*Popular Mechanics*.

CEMENTING REMOVABLE BRIDGEWORK.

In the case of removable bridgework or partials where agilmour attachment is used, place the parts in apposition after putting a thin coating of vaseline on the spur and saddle, then cement the crown with the parts attached to it. This insures an accurate fit and the vaseline allows the excess cement that gets on to the attachment to come off very easily.—S. R. D. '19.

A CORRECTION.

A report in our January issue of a Clinic held at the Depot of the Dental Co. of Canada, appeared as having been given by the S. S. White Co., whereas their successor the Dental Co. of Canada arranged for the Clinic.

HYA YAKA

CONTENTS

VOL. XVI.

MARCH, 1917.

NO. 6.

	PAGE
“Determination”	<i>Frontispiece</i>
Active Service Roll.	221
Increased Masticating Efficiency. R. D. Thornton, D.D.S., L.D.S.	225
Oral Amoeba. M. C. Mills '18	231
Drugs and their Uses in the Practice of Dentistry	233
Correspondence—Letter from V. D. Speer.	235
Letter from Lieut. T. D. Campbell	236
The Toothache.	239
Surgical Treatment of Abnormal Edentulous Mouths and Facial Restoration with Dentures. Jas. P. Ruyl, D.D.S.	240
Editorials.	246
Note and Comment	248
Personals and Marriages	250
St. Patrick's Dance and Sophomore Dance	252
Two Prominent Members of Profession Address Students.	254
Questions and Answers	255
Athletics.	256
Mirth	263
Useful Hints	264



Determination

THERE is no chance, no destiny, no fate that can circumvent or hinder or control the firm resolve of a determined soul; gift counts but little, will alone is great; all things fall before it soon or late. What obstacle can stay the mighty force of the sea-seeking river in its course; or cause the ascending Orb of day to wait? Each well-born soul must win what it deserves; let the fool prize of luck; the fortunate is he whose earnest purpose never swerves, whose slightest action or inaction serves the one great end; why even Death stands still and waits an hour, sometimes, for such a will.



THE HYA YAKA

VOL. XVI.

TORONTO, MARCH, 1917

No. 6

Active Service Roll

HONOUR ROLL

Major P. P. Ballachey, 58th Batt. Lieut. H. J. MacLaurin, 43rd Batt.
Major C. E. Sale, 18th Batt. Pte. H. Greenwood, 76th Batt.
Gnr. O. G. Dalrymple, 67th Battery. Capt. J. R. Duff, 79th Batt.

DENTISTS

ATTACHED TO CANADIAN ARMY DENTAL CORPS.

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Lt.-Col. George Gow	Capt. W. R. Eaman	Capt. E. J. Kelly
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 Sgt. H. Conway
 Sgt. L. S. Smith

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 Lieut. S. G. Alderson
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 Lieut. F. E. Humphrey
 Lieut. H. C. Jeffrey
 Lieut. R. R. Larmour
 Lieut. L. Lemire
 Lieut. T. H. Levey
 Lieut. H. C. Mann
 Lieut. D. W. Massey
 Lieut. H. L. MacInally
 Lieut. C. F. McCartney

Lieut. E. F. McGregor
 Lieut. L. D. McLaurin
 Lieut. W. H. McLaren
 Lieut. W. S. McLaren
 Lieut. G. R. McMillan
 Lieut. G. A. Munroe
 Lieut. E. J. Oliver
 Lieut. F. H. Quinn
 Lieut. J. H. Reid
 Lieut. W. H. Reid
 Lieut. T. E. E. Robins
 Lieut. W. J. Rutherford
 Lieut. R. E. Sheehy
 Lieut. H. A. Simmons
 Lieut. W. Sinclair
 Lieut. W. J. Taylor
 Lieut. A. J. Thomas
 Lieut. E. L. Thompson
 Lieut. T. S. Tucker
 Lieut. J. W. Turner
 Lieut. B. L. Washburn
 Lieut. V. D. Wescott
 Lieut. C. E. Williams
 Lieut. E. H. Wilson
 Sgt. L. H. Coursier
 Sgt. C. C. Graham
 Sgt. C. H. Lipsey

Divisional Officers.

Major F. Bradley
 Major T. C. Bruce
 Major A. Dubord

Major H. T. Minogue
 Major F. P. Shaw
 Major W. G. Thomson

Major. F. M. Wells
 Major J. M. Wilson
 Major W. W. Wright

ATTACHED TO CORPS OTHER THAN C.A.D.C.

Overseas.

Lt.-Col. E. F. Armstrong, 159th Batt.	Capt. A. L. Johnson, 68th Batt.
Lt.-Col. Neil Smith, 181st Batt.	Capt. J. L. McLean, 59th Batt.
Major G. S. Cameron, 9th C.M.R.	Capt. Walter McNally, 179th Batt.
Major F. T. Coghlan, 25th Battery	Capt. S. J. Redpath, 47th Batt.
Major Chas. A. Corrigan, Army Service Corps	Capt. E. F. Risdon, C.A.M.C.
Major H. A. Croll, 10th C.M.R.	Lieut. A. J. Kennedy, 114th Batt.
Major N. Schnarr, 94th Batt.	Lieut. A. R. Leggo, 58th Batt.
Capt. K. C. Campbell, 43rd Batt.	Lieut. C. Nicholson, 129th Batt.
Capt. J. Harper, Royal Navy	Lieut. C. E. Wright, 80th Batt.
	Q.M.S. G. P. Howard, 122nd Batt.

UNDERGRADUATES.

ATTACHED TO CANADIAN ARMY DENTAL CORPS.

Overseas.

W. G. Alston	H. B. Legate	C. Parker
H. G. Bean	W. M. MacKay	A. R. Poag
E. V. Elliott	A. W. McKay	J. N. Robertson
R. G. Hyde	E. C. McKee	G. A. Sirrs
J. T. Irwin	C. T. Moyle	F. L. Thompson
A. W. Jones	G. S. Murray	A. Walton
J. V. Lally	A. L. Norton	B. Watson

Concentration Camps.

C. H. Avery	T. H. Hutchinson	J. A. Munn
F. E. Babcock	G. Johnston	C. R. Oke
J. W. Bartholomew	J. A. King	C. G. Pickard
R. J. Beckett	C. H. M. Laidley	J. W. Pickard
J. T. Brown	M. P. Lamey	A. Poyntz
E. T. Carrothers	T. D. Lewis	C. G. Reid
A. E. Chegwin	J. F. Lippert	E. A. Reid
A. F. Cooper	V. C. Long	H. R. F. Richardson
W. J. Cooper	J. Lynes	W. R. Richardson
C. A. Courville	D. MacLachlan	T. A. Robinson
R. Des Rosiers	A. A. MacPhee	R. Rochon
G. Dodge	H. J. McCann	C. J. Rogers
L. F. Dupuis	E. McFeeors	J. L. Rogers
A. V. Gardiner	S. M. McLeod	D. G. Seaton
P. Girvin	P. H. McNichol	W. B. Shantz
J. W. Golding	J. L. Mackle	G. L. Smith
R. W. Hall	R. J. Marion	H. D. Taylor
N. W. Haynes	G. F. Mitchell	W. W. Voaden
E. D. Hicks	J. G. Montgomery	R. N. Webster

ATTACHED TO CORPS OTHER THAN C.A.D.C.

Capt. R. M. Barbour, 64th Batt.	G. W. Howson, 126th Batt.
Capt. J. A. Egan	A. S. Holmes, Div. Signal Corps
Lieut. J. G. Larmour, R.F.A.	†J. E. Irwin, 4th U. of T. Co.
Lieut. R. B. McGuire, 15th Middlesex Reg. (Br.)	G. G. Jewitt, Artillery
Lieut. T. H. O'Rourke, 180th Batt.	J. M. McLeod, Div. Signal Corps
H. R. Anderson, 67th Batty.	G. Pollock, 67th Batty.
R. T. Broadworth, 67th Batty.	R. G. Reid, Mechanical Transport
A. G. Calbeck, 67th Batty.	W. E. Sheridan, 67th Batty.
F. Cluff, 161st Batt.	†G. H. Sloan, 30th Batt.
E. R. Dixon, Mach. Gun	W. H. Smith, 160th Batt.
R. W. Freestone, 67th Batty.	W. L. Smith, Div. Signal Corps
E. Garfat, 71st Batt.	C. W. Steele, 67th Batty.
G. E. Harper, 118th Batt.	†V. D. Speer, 67th Batty.
G. M. Heisz, Div. Signal Corps	T. E. Walker, C.F.A.

Concentration Camps.

Lieut. R. Bishop, 252nd Batt.	A. C. Mallough, C.A.M.C.
C. C. Ramage, C.A.M.C.	

†Acting Director of Dental Services, address Ottawa. *Lieutenants rank as Captains while overseas. C.A.D.C. overseas address—Care Director Dental Services, Canadian Contingents, 23 Earls Ave., Folkestone, England.

‡ Wounded.

Increased Masticating Efficiency

BY R. D. THORNTON, D.D.S., L.D.S.,

Professor of Dental Anatomy and Comparative Dental Anatomy
Royal College Dental Surgeons.

PERHAPS the foregoing title is not sufficiently comprehensive to include all that the writer desires to discuss. To this might be added a plea for increased oral hygiene and comfort. How commonplace do the things become which one sees every day of his life. The objects which attracted us during our first trip from our place of residence to place of business no longer hold in store for us anything worthy of note; and so it is, too frequently, with the ordinary cases that are met with in dental practice. Familiarity breeds a failure to closely observe details, hence the reason for this paper. Ability to recognize pathologic conditions implies a knowledge of the physiologic; to understand the abnormal one must possess a reasonably familiar acquaintance with the normal.

Nature seems to be ever on the move, either progressive or retrogressive. True, it may be very slowly but surely nevertheless. In the sub-kingdom of Invertebrates, the organs analogous to the teeth of higher forms of life are very varied both in function and form and show but slight evolutionary progress. In the vertebrates, however, the teeth have assumed a definite form with a specific function to perform. The lowest types of fishes possess simple, cone-shaped teeth highly specialized for the purpose of prehension. Some of their predaceous cousins evidently found difficulty in swallowing their prey over teeth of this form, consequently their teeth developed a curve on the tips, allowing their food to pass back toward the throat more readily but making escape more difficult for their unfortunate victims. A higher development of this same principle is found in the hinge-teeth of the hake and pike where the tooth is not only recurved toward the throat, but attached by means of a hinge which allows the whole tooth to bend backward thus not only preventing escape of the struggling prey, but also enlarging the oral cavity and hastening its progress toward its captor's throat. This clearly demonstrates a second function of the teeth, namely, deglutition. A great deal of time and space

might be occupied enumerating the different stages in the progressive evolution of the teeth, but it will be sufficient for the purpose of this paper to pass on rapidly to some of the higher orders of the mammalia. It will be readily noticed that the carnivorous animals, whose diet of meat requires cutting, have developed a hinge-joint motion of the temporo-mandibular articulation permitting only an opening and closing of the mandible. The teeth of these animals are developed with large blade-like cutting surfaces, the cusps of the molar and premolar regions being arranged in a row antero-posteriorly. The diet of the herbivorous animals or vegetable-feeders requires grinding and so we find their teeth developed into large grinding-surfaces and the temporo-mandibular articulation arranged to provide a lateral motion as found in the domesticated ruminants or an antero-posterior motion as presented in the dentition of the elephant. The omnivorous animals show a greater degree of heterodontism than is displayed by either the carnivora or herbivora. The latter classes have specialized highly for the performance of a particular function but the former includes the functions of both in a limited degree. The varied diet of man brings him into this omnivorous class. Man's superior advancement over the lower animals has introduced other functions of the teeth not found in the lower orders. It might be well, therefore, to review briefly the functions of the teeth of man.

These may be divided into primary and secondary functions. The primary have to do with the securing and preparing of food for digestion and assimilation. The most important of these of course is mastication, or the crushing and grinding of the food by the posterior teeth into smaller particles to be acted upon by the digestive fluids. Closely associated with mastication is the function of incision, performed by the anterior teeth. The position of the teeth in the arch also aids the tongue in mixing the saliva with the food, a process known as insalivation, and further assists in deglutition or swallowing. The development of man's anterior pair of limbs for prehensile purposes renders this important function of prehension in the lower orders almost negligible in man.

Of the secondary functions, two at least have been lost in civilized man. The first is warfare, a use which, when exercised in this advanced age, usually ends in a police court sentence. The application of the teeth as tools has also practically ceased in man. They play an important part, however, in speech and have considerable importance from an esthetic standpoint. Who has not

noticed the picture of the stage beauty in the magazines with her beautiful row of upper incisors or the "girl with the pearls" in the chewing-gum advertisements?

Reference has been made to the development of the teeth of man to include both meat and vegetable diet. In the herbivorous animals, the teeth have been specialized to produce a grinding or mill-stone effect. This is brought about in the dentition of man by the contact of plane surfaces or incline planes of the lower teeth against corresponding incline planes of the upper teeth. The carnivora or meat-eaters specialized for the function of cutting their food. Provision has been made for this function in man by means of triangular ridges radiating from the summits of the cusps of the bicuspids and molars and by the heavy marginal ridges along the margins of the occlusal surface. The efficiency of these processes is increased by the occlusion of cusps into the sulci and fossæ of the opposing teeth. The marginal ridges are very important. Many restorations have failed utterly because of the loss of marginal ridges. Food brought into contact with them is forced into the fossæ on the occlusal surface so that the opposing cusp has an opportunity to crush it and at the same time it is prevented from wedging in between the contact points or injuring the gum septum. The points of proximate contact should meet as two spheres and should be in close contact with each other. Spherical contact points permit the easy removal of food debris by the individual motion of the teeth in their sockets but broad, flat contact points defy the best efforts of nature to cleanse these surfaces. It matters but little, however, what care has been taken in the reproduction of contact points if the marginal ridges have been neglected. Long incline planes from the middle of the occlusal surface down toward the proximal surface make a toboggan slide for food in its excursions over the teeth which will eventually cause the separation of the teeth and loss of proximate contact, with the inevitable injury to the soft tissues and alveolar process. The result is usually caries or pyorrhœa. The pits and grooves are also worthy of some consideration. The incline planes of the various sulci and fossæ on the occlusal surfaces terminate in fine pits and grooves. Just why they do so seems a little difficult to explain. It seems to form a weakness against the invasion of decay for these are the locations in which caries usually finds admission through the occlusal surface. And again, the cusps of the opposing teeth do not fit accurately into them. Some authorities claim that less decomposed

food material will lodge in a fine, angular groove than in a shallow, broad depression. Greater efficiency in the comminution of food seems quite probable in the former type of groove.

Unless influenced by circumstances beyond her control, nature usually does her work well. As dental caries seems to be one of the stumbling blocks in the road to health and happiness for the present age, it behooves us to note what provision nature has made against the invasions of decay and other dental lesions. How logically she has arranged her combative forces. Caries is believed to have its origin on the external surface of the tooth, therefore, contact with the tooth by the invading germ is essential. To prevent this, nature has covered the part of the tooth exposed to attack with a hard dense enamel having a smooth, highly-glazed surface which can be readily cleansed by the slightest friction. This applies very effectively to the labial, buccal and lingual surfaces, but the proximal surfaces require further protection. In the normal denture each tooth is so shaped on its mesial and distal surfaces that it proximates its neighbour by coming into contact with it as two spheres would touch each other. This tends to prevent fibrous foods from wedging in between the teeth. To further assist in the prevention of food debris lodging between the teeth, heavy marginal ridges of enamel have been developed on the occlusal surfaces of the posterior teeth which assist directly in comminuting the food and also tend to convey the food to the centre of the large saucer-shaped depressions or fossæ of the molars and bicuspids into which the cusp of an opposing tooth occludes and further aids in mastication. Should the contact-points and marginal ridges fail to prevent fibres of food from being forced between the teeth, a method has been very skilfully devised for its removal. The periodental membrane which envelopes the roots of the teeth has a set of principal fibres which run nearly parallel with the long axis of the tooth and are attached near the gingival margin of the alveolar process. While these fibres are inelastic, yet they are not always at high tension, consequently they permit a slight motion of the tooth in its socket. Force of mastication therefore produces sufficient motion of the teeth individually to remove any debris that might be lodged between the points of contact. Normally the interproximate space is filled with gum tissue right to the contact points. This gum septum is convex on the labial, buccal and lingual sides sloping out from the contact points to the axial angles of the teeth. When food is divided at the contact points it passes

through the buccal or lingual interproximal embrasures to the convex surfaces of the gum septum over which it readily glides until carried free from the teeth.

At first thought, the gingiva or free margin of the gum might be considered a weakness in nature's dental armament. She has, however, carefully arranged for its protection. On the lingual surfaces of the anterior teeth, the cingulum is shaped so that its convexity in an inciso-gingival direction carries hard food substances over the gingiva, thus preventing injury to the soft tissues. A similar protection is provided on the labial surfaces of the anterior teeth and on the buccal and lingual surfaces of the posterior teeth by the general convexity of these surfaces occluso-gingivally and the constriction of the necks of the teeth.

Recent research work seems to have quite conclusively established the origin of many systemic ailments in the pathologic conditions existing at the apical areas of devitalized teeth. The result is a more liberal use of the forcep as an instrument in operative procedure. What follows the loss of a tooth? The answer is impaired masticating efficiency from two reasons. The first is due directly to the loss of the tooth. The second is the result of the disturbance of normal occlusion because the remaining teeth have changed their position. Normally, the incline planes of the lower teeth occlude with certain incline planes of the opposing teeth. When a tooth is extracted, the tooth anterior to it acquires a distal inclination and the one posterior to it inclines mesially. This is sometimes prevented by the deep inter-locking of cusps, but not very frequently. The occurrence of such a disturbance causes loss of contact with the next tooth and indeed it may cause a loss of contact at some area quite distant from the scene of extraction. The tooth opposing the space left by the extraction becomes elongated thus disturbing its relation with its neighbours. The occlusal surfaces of those teeth which have acquired an abnormal mesial or distal inclination will no longer occlude properly with the teeth of the opposite arch. This disturbance may be productive of the most unexpected injury to the patient. One practical case may suffice to explain this more clearly. The patient was a woman about forty years of age, a public singer, who used to take some pride in the appearance of her upper anterior teeth. She noticed during the past four years that the left lateral was gradually being forced under the central and the central was being rotated on its long axis with the distal surface protruding labially. Furthermore,

she was unable to close her incisor teeth together and complained of pains in her face when she awoke in the morning, as if she had slept with her teeth tightly clenched. Impressions were taken and the study models revealed that occlusion only occurred on the distal cusps of one tooth on each side. The reason was quite clear then why she complained of her inability to properly masticate her food. The models also showed the loss of the lower left first molar and second bicuspid, and upper left third molar. The lower second and third molars had acquired a marked mesial inclination which brought the occlusal surface of the lower third into occlusion with the disto-occlusal angle of the upper second. The history of the case dated back almost to the time of extraction of the upper third molar, the lowers had been removed some time previous to that. Undoubtedly, the force of occlusion against the distal side of the upper second molar had driven the entire upper left side anteriorly until the curvature of the anterior part of the arch caused the lateral to force the central labially.

Summing up briefly then, the duty of the dentist seems clearly enough to be: First, prevention of dental pathologic conditions; second, where artificial restorations are necessary,

(a) Prevention of further dental pathologic conditions.

(b) Substitution of masticating apparatus that will be as nearly efficient as the normal as it is possible to make.

It is immaterial whether the restoration is a crown, bridge, full or partial denture, or whether it be the largest or smallest amalgam, silicate or gold filling or inlay. The operator should be fully cognizant of the normal condition and should strive sedulously to replace it as far as conditions will permit.

Mitchell '19, arriving late at the College.

Dr. Webster—How is it that you are late?

Mitchell '19—Well, as I was about to board the train the band began to play "God save the King" and I had to stand at attention and the train pulled out.

Neighbour—"They tell me your son is in the college eleven."

Proud Mother—"Yes, indeed."

Neighbour—"Do you know what position he plays?"

Proud Mother—"I ain't sure, but I think he's one of the drawbacks."—*The School.*

Oral Amoeba

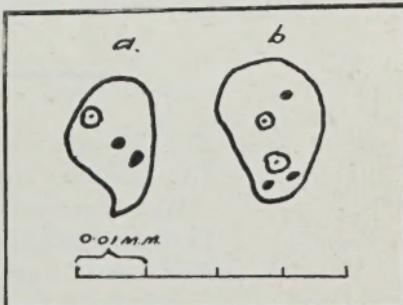
By M. C. MILLS, '18.

ORAL AMOEBA IN GENERAL.—Several forms of endamoebae have been described as common to the mouth cavity. The "Endamoeba Kartulisi" was first studied by Kartulis in Egypt who considered that it gave rise to suppurative tumours of the jaw. This has been studied by other investigators, but they do not attribute the pathogenicity as thought by Kartulis. Gurr in 1849 described the "Amoeba Gingivalis"; and in 1879, Grassi, the "Amoeba Dentalis". Steinberg in 1862 described the Amoeba Buccalis, which is now believed to be the same as described by Prozarek in 1904. This is the one in which we are chiefly interested. In the remainder of this article reference will be made to this particular Amoeba only.

ENDAMOEBA BUCCALIS.—This amoeba has a very wide distribution, and is found especially in carious teeth, and in the pockets of suppuration about the gingiva. Daflein has drawn particular attention to its wide distribution in Europe.

HISTOLOGICAL CONSIDERATION.—This Amoeba varies in size from 6-8 micromillimetres up to 30 or more in diameter. The endosarc and ectosarc is readily made out in the moving Amoeba. The ectosarc form the pseudopodia or temporary protrusion which serve in the purpose of locomotion. We find food vacuoles within the endosarc which contains bits of the chromatin of the leucocytes and portions of red blood cells. This suggested using the culture media advocated by Pfeiffer in cultivation of Influenza Bacillus, but the results have not been very successful. In unstained specimens it is impossible to differentiate the nucleus.

The diagrammatic sketch shows a slide prepared from exudates of a pus pocket in the infirmary of the College, using



Diagrammatic Sketch of Amoebae from smear taken from pus pocket of patient in infirmary.
(a) Example with nucleus in eccentric position.
(b) Amoeba showing usual central position of nucleus.

a 1.9 m.m. lens (oil immersion). A red blood cell was used for measurement.

STAINING.—The technique adopted by Dr. Black gives excellent results. A bit of the purulent contents of the pyorrhea pocket is taken upon an appropriate instrument.

1. Spread pus on slide.
2. Fix by heat.
3. Apply Carbol Fuschin to smear.
4. Wash once with water.
5. Stain with Loeffler's Methylene Blue $\frac{1}{4}$ — $\frac{1}{2}$ min.
6. Wash, dry and examine with oil immersion lens.

CULTIVATION.—Dr. Harold K. Box, Professor of Pathology, R.C.D.S., has done excellent work along this line. After repeated attempts to grow Amoeba in ordinary culture media, he has devised a special media which is the fourth to be shown in pure culture. This should open an avenue for greater research work to determine what role it plays in the production of lesions about the gums or whether it is merely a secondary invader.

BIOLOGICAL CONSIDERATION.—Through the researches of such men as Bass, Johns, Barrett and Smith, the Amoeba has been given a very important biological consideration as the cause of Pyorrhea and its association with Emetin. This has been denied by others based on clinical findings. Dr. McDonagh states that a 10 per cent. Lactic acid solution will cause their disappearance from pockets about the teeth. Perhaps the great results which are claimed to be due to Emetin will be found not to be due to its action on the Amoeba, but directly in the blood itself. This, of course, cannot be said as yet and only further research will decide.

The Germans was rooshing at me,
To make me a funeral be,
Wen Tommies come queeck,
In time of ze neeck—
And voila! I gront not, you see.

In a village cemetery in Yorkshire the following recruiting poster was found—"Wake up. Your King and Country Need You Now!"

Drugs and their Uses in the Practice of Dentistry.

ANTIPYRETICS—

Tinct. Aconite
Asperin

ANTISEPTICS AND DISINFECTANTS—

Hydrogen Peroxide
Formo-Cresol
Menthol
Campho-phenique
Tinct. Iodine
Oil Cajaput
Oil Cassia
Oil Eucalyptus
Alcohol
Phenol
Oil Cloves
Creosote
Tricresol
Formaldehyde
Thymol
Pot. Permanganate
Sodium Potassium
Sulphuric Acid
Phenol Sulphonic Acid
Aristol

ASTRINGENTS—

Adrenalin Chloride
Silver Nitrate
Zinc Chloride
Tannic Acid

BLEACHER—

Sodium Peroxide

CARMINATIVE—

Aromatic Spts. Ammonia
Oil Cassia
Oil Peppermint

CAUTERANTS—

Silver Nitrate
Phenol
Trichloracetic Acid
Zinc Chloride
Sulphuric (in canals)
Phenol-sulphonic (in canals)
Potassium and Sodium
(in canals)

COUNTER IRRITANT—

Aconite and Iodine

DETERGENTS—

Hydrogen Peroxide
Alcohol

DIAPHORETICS—

Tinct. Aconite
Camphor

EMOLLIENTS—

Glycerine

GENERAL ANAESTHETICS—

Chloroform
Ether
Ethyl Chloride

IRRITANT—

Tinct. Iodine

LOCAL ANAESTHETICS—

Paraform
Cocaine Hydrochlorate
Anocain
Ethyl Chloride

LOCAL ANODYNES—

Camphor
Menthol
Campho-phenique
Phenol
Oil Cloves

PROTECTIVE—

Collodion

SEDATIVE—

Tinct. Aconite
Potassium Bromide

SOLVENTS—

Water
Chloroform
Alcohol
Xylool
Cajaput
Eucalyptus

STIMULANT—

Camphor
Aromatic Spts. Ammonia
Alchohol (Whiskey and
Brandy)
Strychnine

STYPTICS—

Hydrogen Peroxide
Adrenalin Chloride
Trichloracetic Acid
Dialized Iron

Leuty '18—"Why does Reid's lady friend call him up every evening?"

Saunders '17—"How did you lose your hair?"

Truemner '17—"Worry."

Saunders—"What did you worry about?"

Truemner—"About losing my hair."

Winn '20—"Do you know anything about surgery?"

Gemeroy '20—"O yes. I shave myself."

Boyd '18—"When is a baby like a breakfast cup?"

Henderson '18—"When it is a teathing."

Correspondence

EXTRACTS FROM LETTERS FROM V. D. SPEER.

The Editor of HYA YAKA:

Enclosed please find some portions of a couple of letters we have received from Douglas. I think it not prudent to publish all we know of the real fighting in which he has been engaged, but you can read between the lines in what he has written. He has been on the firing line nearly all the time since he landed in France.

Yours sincerely,

(REV.) J. C. SPEER.

“Somewhere in France.

“ Dear Folks,

“ This will be another note to say that I received your boxes all O.K. I don't think there is any fellow who gets such boxes as I do, and I will have to go some to pay you all back when I get home; but I'll do my best to make it up and we will have some good old times. Say, but those cakes were 'Jake'. They're just the thing out here; for, while we can get eggs and potatoes very reasonable, cakes and that kind of food are pretty steep. You need never worry about what to send me for you certainly hit the right things every time.

“ I'm on light duty to-day with a sore foot, but outside of that I'm feeling fine. I'm writing this on my bed in the bivouac. Most of the fellows are billeted in houses, but a couple of us got a tarpaulin and rigged up a shelter so we could be by ourselves. We have our blankets on the ground and are quite comfortable. After a couple of years of this life a fellow should be a great gipsy, but here's hoping I'll be back before that long. We're having a real Canadian winter and it sure is chilly, but it is better than the rain.”

“ I'm writing now while in a French barn, where we are quite comfortable, as we have a layer of straw to sleep on. Only four of us are billeted here. Those French houses are fierce—a ricketty old barn next road, behind it the barnyard, and then the house with

its tile roof and floor. Right in front of the door is the manure, which has evidently been there for years.

"Believe me, I don't think I'll know how to live in a civilized country when I get back. I've seen a bit of this country, and I know what it is to be a soldier—mud, shell-holes, long marches and blazing 'coal-boxes' which almost rip the world to pieces. This was the kind that nearly made an undertaker unnecessary for me. It was a narrow shave, but I came out of the scrap with only a touch. We are here to do our bit and we'll see it through.

Love to all,

Your loving son

'DOUG.'"

Dental Clinic,

Shoreham-by-Sea,

Sussex, Eng.

To the Editor of HYA YAKA:

I am in a rather peculiar dilemma, having received four HYA YAKA's (October 16 to January 17) from someone who is most generous and thoughtful, whose exact identity is a matter of uncertainty to me. To do no one an injustice, I am leaving it in your hands to play the detective, and convey my most hearty thanks and appreciation to the proper party.

I have been fairly lucky in getting letters, papers and magazines since leaving Canada, but nothing "struck the spot" like HYA YAKA. Strange though it may seem, I had never quite realized that I was an undergraduate no longer, until I started to read about all that was taking place at the College, just as usual. And right here I want to express my congratulations to both you and your staff for the extremely excellent college magazine you are now producing. Not forgetting the splendid efforts of those who have gone before, I think I can safely say that all must agree, that the standard has certainly been raised.

At present I am attached to the 13th Reserve Battalion of New Brunswick, and must not forget to state that we are quarantined, on account of an outbreak of mumps. I have often heard of C.B. spoken of in a rather jocular manner, but after the horrible reality, I am afraid that I shall never be able to smile at the mention of those letters again—politics excluded. You will notice that I said 13th Reserve, and I am quartered in Room No. 13, but have never been

able to muster sufficient courage to ask anyone the number of the hut—fearing the worst. Who said 13 was a lucky number?

Life in the Dental Corps in England is as far removed from that in Canada, as, I expect, it is in France from that in England. At any rate, it is much more interesting here, and all the vast number of ever-changing intricate rules and regulations make one realize to a greater degree, that we are really in a life and death struggle. For example, the different categories are continually changing. All "A" class men who are dentally unfit, are put in another class until they become fit, when they resume their original status. According to recent instructions a man who has eight teeth in occlusion is deprived of the privilege of having dentures made. Extensive extraction, which, under normal conditions necessitate artificial substitution, is avoided as much as possible.

It is most regrettable that an efficient system of dental inspection has not been instituted long ere this at the time of enlistment, as medical inspection. To follow this up by having all necessary extractions made at the earliest possible moment, ample time would be given for a reasonable amount of absorption to take place (an occurrence which up to the present has, in the great majority of cases, been the exception, rather than the rule). Under this system the most, if not all, of the prosthetic work could have been done before the recruit, now soldier, would have proceeded overseas. The remainder would, in any case be in good condition to have satisfactory dentures inserted upon arrival in England. The concensus of opinion of all the officers that I have met, who have been over here for any length of time, is that all of the prosthetic work should be done in Canada. Of course, it is very easy to say what should be done, and vice-versa, but an entirely different thing to do it, and to minimize in the least, all the wonderful work which has been accomplished, would be most deplorable. I am writing as though I were some great authority, rather than a most humble member of Class '16, but feel that I, at least, can do no harm in noting the above facts and suggestions.

You might be interested to know just how much work we are doing here. To-day I saw eighteen patients, the work which I did totalling fifty-three operations, and that, speaking for myself alone, was a fair day. Of course it varies considerably, for instance last week in our main clinic where seven of us were working, we treated 592 men, completed 478, the number of operations totalling some

It would be a great mistake for me not to mention that I noted, with much interest, that the College is still represented in the C.O.T.C., under the most able leadership of Dr. Willmott and Mr. Broom.

If this arrives in sufficient time and is of sufficient interest to print, I shall feel that I have been of some small service to the HYA YAKA.

Again I wish to express my gratitude to my unknown benefactor.

T. D. CAMPBELL, Lieut., C.A.D.C.



The Toothache

Yes; yes, it aches—that rotten tooth!

I'll try no longer to conceal it;
My face alone would tell the truth,
But no one knows how much I feel it.

There, shut the door! Confound the noise!

“Yelp! Yelp!” Well, keep from under my feet.
It seems as though those noisy boys
Were mocking me, out in the street!

Oh, yes, I know 'tis all my fault!

I should have had the puncture filled;
What's that? A little table-salt?
A bit of creosote distilled?

I've tried 'em both, and more to-day—

That pain is tingling to my toes!
Can get it better? Where I pray?
Why, sure! at Jones', I suppose.

“Is Doctor Jones, the dentist in?
An aching tooth has made me fret;
But something seems to lull the pain—
Perhaps, sir, you can save it yet.”

“Too long neglected—must come out;
A mere unhealthy, useless shell,
'Twil hurt a little, there's no doubt,
But when 'tis over you'll be well.”

“Well, pull it easy, doctor, do!
'T will not hurt much I think you said,
The gum—why, you are cutting through!
Oh! ouch! you're pulling off my head!”

The tooth is out: and once again
The throbbing, jumping nerves are stilled,
Reader, would you avoid the pain?
Then have your crumbling teeth well filled.

—*Oral Hygiene.*

The Surgical Treatment of Abnormal Edentulous Mouths and Facial Restoration with Artificial Dentures*

JAMES P. RUYL, D.D.S., NEW YORK.

AMONG many things which come to our notice, in connection with daily practice, are certain abnormalities which occur in front teeth in their relation to the upper and lower jaws. How often do we find mouths with partial dentures replacing the lost bicuspid and molars, where the anterior uppers or lowers (in most cases the uppers) stand out of position, with consequent protruding lips, because of faulty occlusion—an unsightly condition, making a person plain who might otherwise have been good looking. And how many times have we seen plates worn which constantly move while the wearer was talking. Again, patients have come to us who, in want of plates, show their gums during ordinary lip movement, and when we are called upon to make plates for them we wish they had never found our office, or we send them to the other man, so that when relatives or friends inquire who made their plates the blame may not rest on us. We have all noticed these unsightly mouths as we went through the streets or sat in front of them in street cars, and we always inwardly hoped that nothing similar would present themselves to us.

Perhaps just as well here as anywhere a far-reaching ethical point may be touched upon. I refer to these tragedies of sensitiveness which abnormalities of any kind bring about. Doubtless all of us have noticed how people with bodily defects have held back, painfully conscious, from mingling with others, and the happiness, and freedom of spirit, and even the progress of the individual has been impaired. I have known patients to cover their mouth with their hand, and even to refrain from smiling; and I myself have rejected an otherwise competent applicant for work because of some dental defect.

Now, for convenience, I will divide the conditions which arise from these abnormalities into four general groups. It is my inten-

*Read before the Toronto Dental Society, Monday, 22nd January, 1917.

tion to state them with their causes, and to give an effectual method of correction.

The first and most common one we come across, and one of the most difficult to rectify unless properly done, is that condition which is brought about because the patient has only six or eight natural anterior teeth—bicuspid and molars being gone—and has worn an upper plate for many years. In his endeavor to reach for food while chewing these lower natural teeth have gradually become loosened and elongated, and there has been a marked forward movement of the process and of the teeth, with a consequent thick lower lip and the appearance of a protruding lower jaw, resulting in the extreme cases of pyorrhœa. In such mouths, that have worn a plate for a long time, great absorption takes place in the upper front jaw caused by the constant hammering of the lower teeth upon it, and the uppers disappear so much that they cannot be seen, giving one the impression that there are no teeth in the upper jaw at all. If you wished to make an upper plate for some one having conditions in the lower jaws, as I have just stated them, you could not make one that would be right, because the lower teeth have grown up so high that they extend above the line of the occlusal plane, often as much as an eighth of an inch. If you set the centrals and laterals of the upper plate their proper length—about one-sixteenth of an inch below the upper lip line—you would then create a condition where the patient could not close his lips. Now if you wanted to continue and make the lips meet, and you did not make a correction in the lower jaw by removing the lower teeth and process, you would have to set the uppers so high that there would be an appearance of no teeth in the upper jaw, and the result would be a sagging of the mouth, changing what was animated and pliant into a set, stern and aged condition. My point is, without removal of the teeth and an operation you could not relieve the abnormality.

Next there is the abnormality due to a natural condition where the gums are long and the lips are short. People with this kind of mouth are generally discouraged with their appearance, and conscious of their defect and hopeless of making any improvement, are prone to neglect their teeth, even to necessary fillings. They lose them early, and the dentist, making a plate, fits teeth to the same length of gum, usually with no rubber against the ridge. The teeth must be ground right up to the gum, and in a short time there is an unsightly space between it and the teeth. Such a plate is very difficult to hold in place and get any degree of comfort in mastication.

The third abnormal condition, due to adenoids, thumb-sucking and irregularities is a pointed arch, with teeth slanting forward, and when they come to us there is no longer any possibility of regulation, usually because there are too many teeth gone, or the patient is too old and cannot give up the time.

The fourth abnormal condition is the one where plates have been worn for many years, and where the process has entirely absorbed, leaving a soft, flabby ridge. When it falls to some dentist to make a plate for a mouth of this kind, he, to make a good fit, puts in an



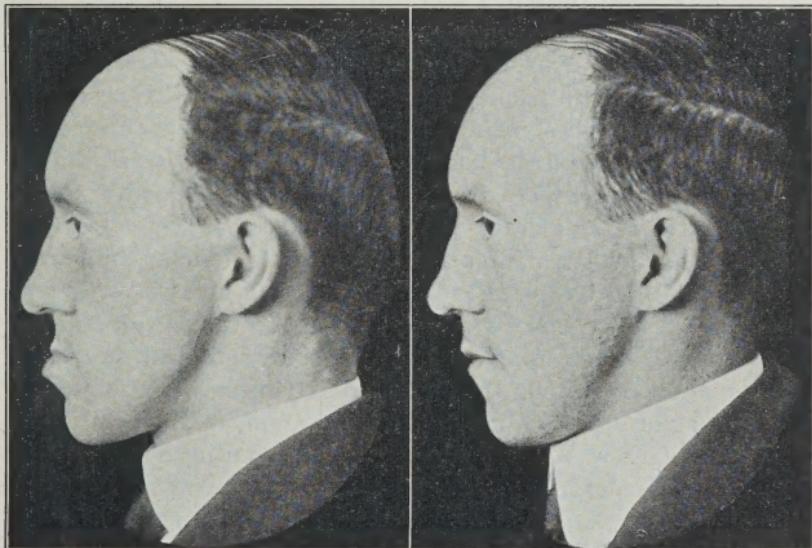
Woman of 34 years having six anterior teeth in each jaw, with a marked protraction, and showing her gums during ordinary lip movement. There was an accentuated migration of these teeth and enlargement of the process, due to continued mastication on these front teeth.

Same woman with full permanent dentures in place six weeks after the extraction of her teeth and the removal of one-quarter inch process from upper and lower jaw. The distance from nose to point of chin lessened one-half inch, thereby making a much improved cosmetic effect.

extremely deep air chamber, which causes the mucous membrane to pull down and form a cauliflower-like appearance of the tissue, and because of a consequent increased flabbiness, not only of the ridge now; but also of the palatal portion, he gets more movement of the plate than before.

All these conditions must be treated surgically. To leave an unsightly condition, or to augment it, as most dentures will in an abnormal mouth, is not doing justice to a patient. As much of the

superfluous process must be removed as will, in your own judgment, restore a natural comeliness and, in many cases, an increased comeliness over nature. Even after the removal of a tooth, in cases where you do not expect to make a facial restoration, it would be advantageous both to dentists and patients if, at the time of extraction, the sharp pieces of process that remain where the cervical border of the tooth was, were removed. This is often the case with the cuspid tooth, where the process is a little thicker and more prominent. By so doing you not only hasten the time for the impression, but also



The above illustrates a full upper denture which had been worn for 12 years with a few remaining anterior teeth. These had an excessive forward movement due to the continued hammering against the upper plate and thereby creating a pronounced resorption of the upper anterior process.

The same man after the removal of lower teeth and process with full dentures in place and a pleasing facial restoration.

save the patient many hours of pain. The sharp prominences that are left by not removing the process are troublesome in eating, etc., and the thin membrane that stretches over it is only a slight protection to the process underneath, and makes it consequently very susceptible to pain. Those cases with very soft ridges and no process underneath—the process being entirely absorbed—must be treated surgically also, by removing the tissues until such a time as the membrane will just make a thin portion over the bone. By so doing you get the mouth into a condition where the plate rests

on a solid foundation, and so prevent its shifting, which would not be the case if the soft tissues were left. It is the same principal as trying to build a house upon a sand foundation. The operation is so simple, so easily done—only an obstruction to remove—that it would seem more natural to do it than not to do it.

With the exception of that condition where there is soft membrane, all the abnormalities caused by bony prominences are treated in the same way. A general or local anaesthetic can be used. My local anaesthetic is: Cocaine Hydro., gr. 5; Ac. Boric, gr. 5; Sod. Chlor., gr. 5; Sod. Adren. Chlor., m.; 10 drops Aqua. List. q. s. vid., oz. 1.

The injections are made labially and palatally. Loosen the gum around the teeth with a lance and extract them. If it is necessary to operate in both jaws, make the injections in the upper and lower at once and operate on the bone only in one jaw, and when that is finished, remove the teeth from the other jaw and operate there. My reason for working in this way is to avoid a sponging of blood in places where you are not operating. After removing the teeth, place a blunt instrument about a quarter of an inch wide, shaped somewhat like an ordinary wax spatula, between the process and the gum, and by leverage, using the process as a fulcrum, tear the mucoperiosteum away, leaving the bone perfectly clean. This is easily done, far more easily than dissecting the gum, and causes much less bleeding. Now hold the gum flap back, and using a bone forcep or better still, a curved wedge cutter, cut off as much process as is necessary. The sharp edges which are left palatally and labially must be rounded off with a bur or an engine stone. Apply water with a syringe while doing so. You will now have flaps of gum hanging down anteriorly and posteriorly, and you can very easily cut them off with a gum scissors. Remove enough gum tissue, so that the parts will not quite unite, when pressing together with the finger and thumb—about a sixteenth to an eighth of an inch. By thus not allowing the membranes to come together absolutely, you will find when the healing takes place that the gum reaches over the bone and leaves a firm healthy ridge. It is not necessary to put in sutures at any time. Absolute healing takes place, and in a month to six weeks permanent plates can be put in. I have taken impressions for temporary plates in five to ten days after such operations, and they were worn from one to two years. In the operation for cases where there is a pointed arch it is generally only necessary to remove the outer plate of process in order to

get the lip back to normal. One need not cut off the whole process—only the front part—because in this case you do not show the gum so much; you only want lip restoration.

For the operation upon soft, flabby ridges, inject in the same manner. Instead of beginning at one side of the ridge and cutting clear across to the other side, begin in the centre of the soft tissue and cut both ways, because by so doing you prevent the flaps from getting in the way while you operate. In these cases healing takes place so rapidly that impressions can be taken in a week or ten days. The cauliflower-like appearance of the soft tissues, caused by extremely deep air chambers, is removed in the same way, except that a curved lance is used. Shave down to the periosteum.

Such radical changes very often bring us into difficulties with members of a patient's family, because they have become so accustomed to the old expression that, when a correction is made, even though the expression be markedly improved, it is often very hard to get them to consent to a change. However, if a proper plate, producing adequate restoration, is worn for a week or so, the change for the better is so quickly taken up by the rest of the family that if the old plate were then put in they would not accept it for a moment.

It seems to me that this work has brought me more satisfaction than any I have ever done. To overcome difficulties which have usually been neglected, and to bring to a successful issue what was formerly a bug-bear, should, of course, give one great pleasure, but more than all this to me is the joy I have felt in seeing my patients so well satisfied and knowing that I have given them perhaps more than mechanical service.—*Oral Health.*



DR. E. J. OLIVER JOINS C.A.D.C.

One of the recent members of Class '17 who graduated with the Summer Course to receive an appointment in the C.A.D.C. is Dr. E. J. Oliver. Lieut. Oliver has been attached to Military District, No. 3 at Kingston under command of Major M. F. Wilson.

THE HYA YAKA

A JOURNAL PUBLISHED MONTHLY DURING THE COLLEGE YEAR
BY THE STUDENTS OF THE ROYAL COLLEGE OF
DENTAL SURGEONS OF ONTARIO

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No. 6.

Editorials

HOLDING OFFICE.

THE first consideration of a careful student who has been made a nominee for a certain office is whether or not he should stand for election to that office. The greatest problem which will confront him will be to what extent his academic work will be interfered with. If his office will detract to any great extent from either study or laboratory work he should decline nomination and devote his entire attention to his work. If he thinks his work will not suffer and he feels that he has had some previous experience which would qualify him for that particular office, he may stand for nomination. This does not mean that only the best qualified man should run, as he may not be popular or well-known. Many men are too modest to state their abilities, or when they do state them, underestimate them, often allowing a less competent man to receive nomination.

The successful candidate should realize the importance of the obligations he has assumed and the responsibility resting upon him in the proper performance of his duty. He must remember at all times that he has been placed in that particular office by his classmates who expect him to render the best possible service. Too often the best service is not rendered on account of lack of appre-

ciation. If the work has been well done it should receive the commendation of the professors as well as the students.

Finally, in choosing a candidate consider all that he is as a man. If you think him worthy, support him. If he is elected, stand by him; show an interest in his particular work, and offer him any helpful suggestions. He will be glad to receive them.

A UNIFIED CANADIAN DENTISTRY.

About ten years ago the Dental Colleges of Canada and the United States proposed to make the course for a licence to practise dentistry and the degree of D.D.S., four academic years, instead of three. However, two or three of the American colleges subsequently decided not to lengthen the course, and the remainder of the dental colleges of United States followed their example. The Canadian schools adopted and carried out the plan of a four year course. Many Canadian students especially from the Western provinces, have since that time been attending the American colleges, thereby gaining a year's time.

This year, however, the colleges of the United States have again decided to make dentistry a four year course. There is, therefore, no longer any advantage for Canadian students in attending American colleges. There is a serious disadvantage of not having an opportunity of taking the Dominion Dental Council Clinical examinations during the college term. An opportunity has thus been opened for uniting and unifying Canadian dentistry. That this opportunity may not be lost the Board of the Royal College of Dental Surgeons has decided to send a representative to the Western provinces to lay the claims of the Royal College before the men of the west.

It has been suggested that a new policy be followed with the Freshman Class next fall. All those who wish to attend the College and who are physically fit will be placed in a special class and be held ready to meet the exigencies of the C.A.D.C. as these may arise. Those students who are not physically fit will enter the regular Freshman Class and proceed with their course in the regular way.

Note and Comment

It is hard to find a vacant chair in either the infirmary or the prosthetic room these days. The seniors appear to be hard workers.

The improvement in the attendance of the members of the Senior class is quite noticeable. Probably Dr. Webster's list acted as a stimulus to certain members.

The elections aroused unusual interest amongst the students, and the contest was one of the keenest for some time. The results were not complete at the time of going to press, but will be published in next month's issue.

The Sophomore class is looking forward with anticipation towards invasion of the infirmary in the near future, when each member will hack, cut or otherwise mar for life the gums of a fellow classmate in his effort to do a so-called prophylaxis.

The Sophomores have been well trained and duly warned of the importance of proper root canal technique. Some 1,500 skiagraphs of root canal fillings (?) of extracted teeth have been taken up-to-date.

The Junior class was too busy this month to hand in any class news. Doubtless studying for exams.

The new sterilizers are now being used in the infirmary. Every sophomore student is advised to have a senior student save one for him in order that he may save real money in purchasing a sterilizer.

Freshmen are also advised to see the seniors in regard to purchasing of dental engines before they are all disposed of.

We are glad to note that the Sergeants' class is doing business every day.

The Sophomore class has come to the conclusion that, before a holiday may be declared two "PSALMS" must be referred to. One "PSALM" answers the question under discussion to his own satisfaction and then refers it to the other "PSALM" for further discussion—and the class does as it likes.

Three members of the Sophomore class spent the week-end in Buffalo recently.

HEALTH ALPHABET.

- A is for *Adenoids* which no child should own.
- B for right *Breathing* to give the lungs tone
- C is for *Cough* which we should not neglect
- D for the *Dentist* who finds tooth defect
- E is for *Evils* of foul air and dirt
- F is for *Fresh Air*—too much cannot hurt
- G is for *Gardens* where boys and girls play
- H is for *Hardiness* gained in that way
- I is for *Infection* from foul drinking cups
- J is for *Joy* in the bubbling taps
- K is for *Knowledge* of rules of good health
- L is for *Lungs* whose soundness is wealth
- M is for *Milk*, it must be quite pure
- N is for *Nurses*, your health to insure
- O is for *Oxygen*, not found in a crowd
- P is for *Pencils*—in mouths not allowed
- Q is for *Quiet*, which sick people need
- R is for *Rest*—as part of our creed
- S is for *Sunshine* to drive germs away
- T is for *Tooth Brush* used three times a day
- U is for *Useful* health rules in the schools
- V is for *Value* of learning these rules
- W is *Worry*, which always does harm
- X is 'Xcess—indulge in no form
- Y is for *Youth*, the time to grow strong
- Z is for *Zest*. Help the good work along.

Personals

Dr. Wallace Seccombe has left for a trip through the western provinces to bring the R.C.D.S. to the notice of the members of the dental profession of the West.

It is rumoured that Major M. F. Wilson, Officer in Command of the C.A.D.C. in Military District No. 3, is in search of officers for the Dental Corps.

Sergt. E. V. Humphries has recently returned from England and intends continuing his course in the fall.

Dr. "Buck" Deans, who is practising in Mount Forest, was a recent visitor to the College.

Dr. Howard James '16 paid his respects to the R.C.D.S. Dr. James will be remembered as one of the most active workers of the R.D.S., being president in his final year.

Dr. Ross Wing '16, who is now practising in Guelph, was around looking up old friends.

We are pleased to see E. C. Young '18 around the infirmary again after his recent operation.

Dr. Siegel, who was a member of the Editorial Staff of HYA YAKA in '16, renewed acquaintances at his Alma Mater.

Lieut. C. F. McCartney is enjoying the work in the C.A.D.C. "Mac" claims it is the only life.

Dr. Fred Humphrey '16 has been forced to give up his practice in Guelph on account of a nervous breakdown. He expects to receive an appointment in the C.A.D.C.

Lieut. Bishop, our hockey specialist, was back to the College for a short while recently.

Marriages

MCCLEAN—WORTS—On Monday, February 19, a quiet wedding was solemnized at the home of the bride's parents by Rev. Anthony Hart, when their eldest daughter, Edna May Worts, was united in marriage to Herbert Arnold McClean, D.D.S. The bride, who was given away by her father, wore a brown broadcloth suit trimmed with champagne, with hat to match and fitch furs. The groom's gift to the bride was a platinum pin set in emeralds and diamonds. Dr. and Mrs. McClean left later for Buffalo and New York. On their return they will reside in Milton.

STAPLES—WATSON—On December 9th, 1916, a military wedding took place at the Parish Church, Brighton, Sussex, when R. C. H. Staples (Captain, C.A.D.C.) of Toronto, Ont., and Marion, only daughter of Mrs. Watson, 4 Norfolk Square, Brighton, were united in marriage. Captain Staples is stationed with the Dental Clinic attached to the Canadian Command Depot, St. Leonard's-on-Sea, Sussex.

CHARTRAND—ROBILLARD—On February 14, at the Sacred Heart Church, Ottawa, the marriage of W. Chartrand '16, D.D.S., to Miss Robillard. Heartiest congratulations are extended.

My MOLARY.

L. L. C. '18.

The hours I've spent with thee, dear Hart
To make a string of pearls for me,
I count them over, every one apart,
My Molary, My Molary.

Each hour a pearl, each pearl a care,
You still a nerve in anguish rung,
I count each tooth unto the end—
All with my tongue.

Oh! memories of drills and burns
Oh! golden gain and bitter loss;
I feel each bead and strive at last to learn
To come across, dear Hart, to come across.

St. Patrick's Dance

ONE of the most enjoyable dances of the season was held on Friday evening, March 16, in honour of St. Patrick.

The floor was in excellent condition, and the Assembly Hall was decorated in the usual manner with bunting and pennants. The great green streamers which were suspended from the ceiling testified to the fact that it was an Irishman's dance. By far the largest turnout of the year was present, especially of the new Freshman Class.

The music furnished by "Rusty" Bear was all that could be desired and the great applause after each dance was sufficient proof that everybody was making the most of it. The orchestra was very generous with encores and thus made quite a hit with the lovers of the great pastime.

Among those present were—Ladies:—Misses A. Spence, G. Elrich, T. Thomas, Jacques, Dame, Edna Holland, Lilian Jones, M. Doyle, Jean Calvert, M. Blanchard, N. Cochrane, Bertha Cope-land, E. Matchett, F. Tufford, S. Wood, Davis, Armstrong, Kohler, McLaughlin, E. Tanner, J. Edgerton, Ethel Girdler, R. Harper, Alexander, Florence Weir, A. Berry, L. Hughes, E. Murphy, E. Ireland, C. Summers, M. Bothwell, B. Reid, O'Hara, Hillis, Mrs Hillis, Canton, Mooney, Jarvis, B. O'Leary, Connelly, A. R. Haynes, Marion Reynolds, E. Thomas, Ruth Prentice, J. Richard, Bradshaw, Douglas, McNeil, Smythe, Maloney, Southby, McCann, E. Turnbull, Jean Dyment, Grace Harrington, Grisdale, Lewis, Gordon, Klee, M. Urquhart, Armstrong, Webey, E. McQueen, I. McLean, L. Wilkis, W. Rimer, M. Trace, Sutherland, Shaw, B. Laurie, Elgar, Penn, Somers, Lee.

Gentlemen:—L. Ryan, L. Beeby, F. Bell, D. G. Scott, G. G. Kinzie, G. Walker, N. McLaughlin, A. McKay, R. Gilbert, E. Carrothers, G. Murray, V. Fournier, A. M. Hord, B. Temple, A. Hartley, A. B. Babcock, C. Maher, W. Hayes, J. Bartholomew, T. Ingram, K. Berry, D. L. Kinzie, R. M. Clark, J. Nesbitt, C. Leggett, M. J. Mulvihill, M. Brick, J. Munn, H. McNick, R. J. Lewis, E. Harris, J. O. Busebois, H. H. Halloran, K. McDowell, N. Haynes, R. A. Hart, L. Crowley, J. W. Pickard, D. Ferguson, R. Shortreed, F. Hillis, J. Griffen, H. Klopp, L. Staples, D. Young,

C. Mahoney, W. Barkley, L. W. Sproule, J. Carpener, Lloyd Miller, C. Mills, M. Seymour, H. Alexander, H. Johnston, L. M. James, W. H. Cameron, Sergt. R. Oke, H. W. Leach, C. Clement, H. Street, R. McLaughlin, G. Gemeroy, A. Palmer, R. Montgomery, J. Dunbar, A. J. Barton, R. Lamey, C. Avery, R. Sykes, J. Montgomery, S. Moore, B. Charles, J. R. McLachlan, H. M. Code, Carl Smith, G. McKee.

Sophomore Dance

On Tuesday evening, February 27th, Class '19 held a very successful dance at Aura Lee Hall. The other years were well represented and the music supplied by Strathdee's Orchestra was thoroughly enjoyed as usual.

The Sophs have a patron and patroness in the class in the persons of Mr. and Mrs. S. M. Richardson, who acted the part at this function.

Some praise is due Messrs. O. Bertrand and H. W. Hogg, through whose efforts such a decided success attended the event.

Come again boys!

Persistently the dentist bores
With his infernal drill;
His labour on a single tooth
Would level Gallows Hill.

Save your pennies—the dollars will take care of your heirs.

Few dentists get bald-headed from their wives patting them on the head.

Trained office girl—One who seems to be trained to get mad every time you ask her to do anything for you.

Push is a good thing to have, but don't waste any of it on pool-room doors.

A Drawing Room—a dentist's office.

Two Prominent Members of the Profession address Students

DR. J. LEON WILLIAMS.

ON Tuesday, February 20, the students of the Royal College were privileged to hear an address from Dr. J. Leon Williams, one of America's foremost dentists. Dr. Williams was introduced by Dean Webster, who expressed the gratitude of the whole College in being privileged to hear such a leader in dental research and dental education of to-day.

Dr. Williams first gave the students a few words of advice. He stated that most men attain only about one-fourth their power. They should do away with all self-consciousness and give the world their best.

He then directed his attention to the evolution of the human teeth. He showed with the help of lantern slides the evolution of the cusps of molars from the tricuspid type to that of four cusps. The decrease in size of the third molar is not considered by Dr. Williams as an indication of degeneration. To substantiate the theory of the origin of man from the anthropoid apes of a million years ago, Dr. Williams showed slides of skulls. He first showed the Pithecanthropus skull discovered in Java in 1894. This skull stands midway between the skull of the anthropoid apes and

He next showed the Heidleburg skull. As there are no genial tubercles on the mandible the function of speech was not well developed. From a radiograph of some of the teeth, the pulp cavities were seen to be twice as large as in the human jaw. In the Gibraltar skull, discovered in 1857, the eye sockets are of an enormous size. When the jaw of this skull was compared with the jaw of an ancient anthropoid ape, a great similarity was noticed.

The Piltdown skull was then shown with the restoration of the Piltdown man following. From these skulls it could be seen what wonderful changes the human races have undergone in the intervening thousands of years.

In conclusion, Dr. Williams advocated the reading of some good book for at least half an hour every day. He considers this the best means of developing moral and intellectual character.

MAJOR O. K. GIBSON.

The Senior class was recently favoured with a few words from Major Gibson, who is second-in-command of the C.A.D.C. in England.

He pointed out the very great need at the present time for graduate dentists and undergraduates to act as sergeants. Thousands of men who were physically fit except for mouth conditions are being held back until their mouths can be put into proper shape and in order to do this within a reasonable length of time more men are needed.

The reason for taking such great pains in not sending men with carious teeth and edentulous mouths to the firing line is to eliminate wastage of men.

Major Gibson also dealt with a few of the disadvantages which the operators have to put up with. For example, there is no such a thing as an electric engine or hydraulic operating chair, such as we enjoy in modern practice in Canada. Each operator is supplied with a standard set of instruments with which he is able to do the work required in as thorough and easy a manner as possible under prevailing conditions.

Regarding the amount of work and class of work done, great praise has been forthcoming from headquarters and the service rendered by the C.A.D.C. is highly appreciated by everybody.

Questions and Answers

Q.—What will prevent rubber from adhering to a model of Spence's plaster compound in vulcanizing?

A.—Burnish thin tin-foil to the cast before flasking case. Avoid thick foil, for it largely reduces suction. A creamy chloroform solution of rubber and pulv. aluminum painted on model with a brush is next best. (See directions accompanying each can of Spence's Plaster.)—I. H. ANTE, D.D.S.

Q.—Why is it that so often in a pus case the molars are too long when the denture is inserted?

A.—There are three reasons: (1) Carelessness in waxing, holding the case between the thumb and forefinger in region of molars, unconsciously putting pressure and thus lengthening the teeth by squeezing the wax. (2) Too much rubber and under pressure the teeth are forced down with the plaster. (3) Flash not closed completely in the posterior portion.

Athletics

O.H.A. HOCKEY.

DENTALS 4; ST. PATRICKS 4.

Dentals and St. Pats. battled away for ninety minutes at the Arena without arriving at a decision, the game ending four all.

At the end of the first period the score stood 1-1, while Dentals were ahead 3-2 at the end of the second. In the third period the St. Pats. scored two goals and were leading by one goal with only a minute to go when Laflamme tied the score on a nice shot from the wing. In the overtime period there were many close calls for both sides, but without a score.

The Dentals were without the services of Hodgins, who was replaced by Doyle. He worked hard. Box played his usual good game. Laflamme played well all the way and Sheldon rushed well. Stewart in the nets was good as usual. Milan and Smillie played their positions well and displayed some good stick-handling.

Referee—Hewitson.

DENTALS 5; T.R.A.A. 2.

Dentals qualified for the semi-finals of the Senior O.H.A. series, when they defeated T.R.A.A. at the Arena by a score of 5-2. They were leading 3-1 at the end of the first period and 4-1 at the conclusion of the second.

Dentals had the speed and lasted better than their opponents. Sheldon played a fine game and scored two of the five goals, while Stewart showed a lot of class in the nets. Milan at centre played his best of the season, scoring two goals. Hodgins and Smillie played their wings well, while Box was brilliant as usual. Laflamme is getting better every game, he scored a pretty goal in the first period which placed his team one in front.

A good crowd enjoyed the game, which was enlivened by a boxing bout with Hodgins and Ferguson the participants.

Referee—Sergt. Steve Vair.

DENTALS 12; PRESTON 5.

Dentals secured a seven-goal lead in the first of the semi-finals by defeating Preston 12-5 on their own ice. Dentals led 3-1 at the end of the first period and 6-3 at the end of the second.

The result of the game was never in doubt after the first few minutes. Box was the fastest man on the ice and went through almost at will. The Dental defence worked well and the forwards were always in the right place. Smillie missed the train and Jimmie Stewart was forced into service, in spite of his bad knee. "Charlie" Stewart was good when he wasn't on the fence. He gave a fine exhibition of diving, but the referee evidently preferred hockey to aquatic exhibitions.

Referee—Oscar Bernhardt, Bradford.

DENTALS 12; PRESTON 1.

Dentals earned the right to meet Riversides in the finals of the Senior O.H.A. when they defeated Preston at the Arena. The score was 12-1 at the end of the first period and seeing they hadn't a chance of winning, Preston defaulted. Dentals pressed from the start and scored at will. Preston only succeeded in getting one counter.

DENTALS 3; RIVERSIDES 1.

Dentals and Riversides clashed at the Arena in the first game of the Senior O.H.A. finals, the former winning out by a score of 3-1. Riversides were 2-1 favourites before the game, but the Dental supporters were not slow in taking advantage of the odds; they took everything in sight and looked for more.

The game started with a rush with Riversides pressing for the first five minutes until the Dentals finally got their bearings and began to make matters a little more interesting. Both sides were back checking too closely for good hockey from a spectator's point of view. Box had a bit of hard luck when he went right through the defence only to be blocked by Collett at the goal mouth. Shortly after this Riversides notched the first goal on a long shot by Dopp, the puck bounding over Stewart's stick. It was a bit of hard luck, but Box evened matters again when on a rush, he netted one on a beautiful shot from inside the defence. The bell left the score a tie 1-1.

On resuming play, Riversides were again on the offensive for the first five minutes and gave Stewart a few hard ones to handle, but "Charlie" was equal to the occasion. Hodgin got the only goal of the period on the prettiest play of the game, after carrying the puck up the side, crossed over, evaded the defence and slipped it past Collett, putting the Dentals one to the good. Dentals

pressed toward the end of the period, but couldn't seem to increase the lead. The period ended 2-1.

The third period opened with Riversides doing their utmost to tie the score, but were watched too closely to go any distance, the Dental forwards checking them to a standstill. Right here Dopp "got in wrong" with the fans by "walking into" Box and laying him out for several minutes. Milan scored the only goal this period on a nice shot from the side. This ended the scoring and the gong found Dentals on the long end of a 3-1 score.

The winners all played fine hockey. Sheldon and Laflamme were a stonewall defence and kept their opponents shooting from long range. Box was brilliant as usual. The forwards played their positions well and back checked effectively. "Charlie" Stewart made some sensational stops, time after time blocking what looked like sure goals.

Referee—Lawson Whitehead.

DENTALS ARE SENIOR O.H.A. CHAMPIONS.

Dentals not only maintained their two goal lead, but again defeated the Riversides by a score of 2-1, thereby winning the John Ross Robertson Trophy for 1917 by a margin of three goals.

The play was rather slow at the start, but soon loosened up considerably. Jimmie Stewart had a little hard luck when his shot hit the goal post. Riversides then carried the puck up and kept the puck in the Dental territory for several minutes, but Stewart handled everything that came his way in the best of style. Riversides looked to have a margin of the play in this period, but were unable to penetrate the Dental defence. The period ended without a score.

The pace was much faster in the second period. The Riversides pressed. Box then secured the puck and on a fine rush circled the Riverside goal and passed out to Milan, who notched the first goal of the game. Riversides then laid siege to the Dental stronghold, but Charlie Stewart was unbeatable, on several occasions doing the impossible. McCaffery finally evened the score on a pass from Dopp. Milan secured the puck in mid ice and was clear through on some nice stick-handling when Parks scored a sure goal by throwing his stick. The Dentals were on the aggressive at this stage. Sheldon on a great individual rush circled the defence and found the corner of the net for the Dentals second tally. The period ended 2-1.

Riversides, seeing their chances dwindling, played their defence well up during the third period, but to no avail. With the Dental forwards back-checking very closely and the defences playing great hockey, Riversides were unable to do the necessary, although they had several nice chances. Jimmie Stewart again hit the goal post after grabbing a loose puck and working his way right in. The next few minutes found the puck in the Dents' territory, but the defence showed good judgment by shooting the puck the length of the ice. The final gong found the Dents one goal to the good.

The Dents all played superb hockey, Stewart in goal made some marvellous stops. Laflamme and Sheldon made a great defence, Sheldon's goal in the second period was a feature of the game. Box was again a bright light with his fine rushing and back-checking. Milan showed some tricky stick-handling around the nets and checked well all the way. Smillie and Stewart played well on the wings and were always dangerous.

Referee—Lawson Whitehead.

INTERFACULTY HOCKEY.

DENTS 5; MEDS 3.

Dents met Meds in the first game of the semi-finals. Captain "Hap." Bowles and crew were confident that they would come out on the long end of the score and Captain Cook and company were on the job to see that they didn't.

Dents started right in and by the end of the first quarter had a comfortable lead of three goals. Meds got a new lease of life in the second period and before Dents woke up had slipped in three counters and tied up the score.

After a curtain lecture at the rest period, Dents came back and tied up the Med forwards and incidentally scored two goals. Dents seemed to have been over confident in the second period, but easily came back and won out by 5-3, without extending themselves.

Pearson, of School, gave excellent satisfaction as referee.

Bowles and Atwell were the dangerous men for Meds, while Cook, Mulvihill, Ross and Moore starred for Dents.

Line-up:—Staples, Roos, Moore, Cook, Mulvihill, Ross. Spares: Ryan, Smith.

DENTS 3; MEDS 0.

Meds were out to redeem themselves for their previous defeat. They made some changes in their line-up and were confident of turning the tables.

They started in like a house-a-fire, but couldn't penetrate the Dents defence. Moore and Roos played brilliant hockey, blocking well, and rushing in great shape. Dents scored one goal in the first period and two in the second.

In the third period Meds put their whole team on the forward line in an effort to score, but Dents, playing a three-man defence, easily stood them off. Sullivan in goal made some good stops in this period. Bowles and Atwell both rushed well, but couldn't penetrate the Dental defence.

Cook's back-checking was a feature of the game and Ross and Mulvihill easily had it on their opponents. Ross was the best stick-handler on the ice.

Scott, of School, made an efficient, though rather lazy official. Instead of skating with the play, part of the time he was resting on the boards, but at that, he got nearly everything.

Line-up:—Staples, Roos, Moore, Cook, Mulvihill, Ross. Spares: Smith, Ryan.

DENTS 0; SCHOOL 1.

School beat Faculty in the last two minutes of play in the semi-finals and earned the right to meet Dents in finals.

“Hap.” Bowles of Meds as referee was impartial, but was unsatisfactory to both teams inasmuch that a lot of rough stuff and forward passes got by him.

Dents started in to make things interesting. Levesque in goal was a target for the Dents forwards, and had a busy time all through the game. If his defence fell down in front of him, he was here, there and everywhere, like a veritable stone-wall. Shortly after the game started he was hit on the temple, but was able to resume after a five minutes' rest.

Cook, Ross and Mulvihill combined time after time right to the goal but couldn't beat Levesque. Roos and Moore made rush after rush, but were invariably stopped by Levesque. Shortly after the second period began, MacDonald scored for School from a mix-up in front of Dents' goal.

Dents were without Staples, who had been ordered home to recuperate from a bad attack of la grippe by “Bonesetter Doc.”

Bright. Roy Wright substituted for him and played a whale of a game. Try as they might, Dents couldn't beat Levesque and the game ended with score 1-0 for School.

Pearson, Scott and Levesque starred for School, while every Dent man played great hockey.

Line-up:—Wright, Moore, Roos, Cook, Ross, Mulvihill.
Spares: Smith, Ryan.

DENTS 3; SCHOOL 2.

Dents started out with the determination to win or die in the attempt. From the start Levesque was kept on the jump. Roos and Ross combined for the first goal. Roos shot, and Ross, following in very fast, netted the rebound. It was a brilliant piece of work.

In the second period, School threatened seriously, but Wright and the defence stood them off. From a mix-up behind the School net, Cook passed out to Moore, who beat Levesque with a high shot into the corner of the net.

In the third period, with about a minute to go, Mulvihill got away clear and had only the goal tender to beat, but was out-guessed. Ross had been sent to the penalty box through an error of the referees, and School rushed. Spencer shot from outside of the defence and found the corner of the net. This goal tied up the round. It didn't come a second too soon, as there was just nine seconds of game left to go.

In the first five minutes overtime, School scored and looked to have the cup. However, "There is many a slip, etc." On a pass from the corner by Moore, Cook scored during the second five minutes. This ended the scoring, and although ten minutes more was played, neither team could land the necessary counter.

Line-up:—Wright, Moore, Roos, Cook, Ross, Mulvihill.
Spares: Smith, Ryan.

Wiley Wilkinson of Aura Lee gave good satisfaction as referee.

FINALS—PLAY-OFF.

After a long dispute with the hockey officials and very much against the wishes of the Dents Executive, the game was played on soft slushy ice. Dents were for waiting for better ice, or taking the game to the Arena, but this didn't coincide with the wishes of the Varsity Athletic Executive, so Dents had to give in. School were at a great advantage with their heavy team on the soft ice.

Play started with Dents pressing, and but for the good work of Levesque, would have scored a couple of goals right off the reel. Finally School broke away, and on a rush by Pearson, who evaded the defence and placed one in the corner of the net ended the scoring for the first period.

Shortly after the opening of the second period, on a pass from behind the goal, MacDonald for School scored the second goal. It was a nice bit of work. Things looked black for Dents, and try as they would they couldn't beat Levesque.

Finally in the last stanza, after a good piece of combination, Cook was able to score. Dents rushed everybody to the forward line in an attempt to tie up the game.

Smith, substituting for Mulvihill, rushed, but was headed into the corner. He passed right across the goal mouth, but nobody was there to take the pass. Try as they would, Dents couldn't negotiate the strong School defence on the soft treacherous ice, and the game ended with Dents in possession in School territory, but on the short end of the 2-1 score.

Line-up:—Staples, Moore, Roos, Cook, Ross, Mulvihill.
Spares: Smith, Ryan.

Wilkinson of Aura Lee handled the bell very satisfactorily.

COMMENTS.

Levesque was the whole works for School. He deserves all the credit for winning.

Manager Pearson, of School is to be heartily congratulated on the good showing of his team.

The Dental management desire to thank the players for their unselfish spirit throughout the season, and for their good attendance at practices. Especially do they wish to thank the various substitutes for the help they gave in filling in the breaches in the team. Every member of the team has played fine hockey all season and the future College teams, from the amount of material shown in the junior years should have no difficulty in bringing back the cup to its rightful and accustomed place in the College library.

Drewry '18—"Because she thinks his heart so much like the weather. She is filled unless she hears daily bulletins of his temperature."

Mirth

Charlie Mayer '19—"Look here. I'm not such a fool as I look."

She (soothingly)—"No, dear, I'm sure you are not."

We hear Luke ('19) humming—

Firſt my love

Second my dove

Third my heart's desire

The fourth I'll take and never forsake

The fifth I'll throw in the fire

We feel sure he has discovered the fourth.

Fortune Teller—"You will be very poor until you are thirty-five years of age.

Saunders '19—"And after that."

Fortune Teller—"You will get used to it."

J. Ingram '18—(daily to Berry)—"Well, Ken, we'll shave it off to-night?"

Berry '18—"No, I think we had better wait until to-morrow."

Have a time and place for business—then keep it where it belongs.

Don't make excuses—don't have to.

Don't waste the patients' time, nor let them waste yours.

Be a diplomatic dictator regarding the value of your time and the way it shall be utilized.

Do not hesitate to put off until to-morrow what cannot be done well to-day.

Crouch '19—"My, that is a swell suit. You're a credit to your tailor."

Hord '19—"You're wrong. Now that I have the suit, I'm a debit to my tailor."

Useful Hints

MEANS FOR DETERMINING VITALITY OF THE PULP.—A useful test for determining the vitality of a pulp is the temperature test. For it a small instrument is heated and applied to the crown of the tooth, or to a metal filling if one be present. If the pulp is vital, momentary pain will be felt on applying the heat. Cold may be applied by dipping a tightly rolled plegget of wool into some very volatile substance, like ether or ethylchlorid, and applying to the crown of the tooth. A positive result is conclusive, but a negative one is not.—*N. Y. Med. Journal.*

REMOVING VULCANIZED RUBBER FROM THE PINS OF PORCELAIN TEETH.—In removing porce'ain teeth from plates, the vulcanite is found to stick to the pins and to cause considerable trouble in attempts at removal, especially from gum sections. This difficulty can be easily overcome by holding the teeth with mechanical pliers over an alcohol flame. The heat is transmitted through the porcelain to the pins and through these to the rubber, which expands and can then easily be removed.

DEVICE FOR HEATING RUBBER.—Try a piece of clean *pasteboard* instead of a metallic cover to warm rubber on and you will have no sticking.—*Dental Brief.*

TO CLEAN RUBBER DAM CLAMPS.—To clean rubber dam clamps, place a number of them in the palm of the hand, add a little powdered pumice, moisten with water, and work together for a few minutes; then rinse in clear water, and you will find that all the little crevices, so hard to get at, will be polished.—*Dental Review.*

SENSITIVE OCCLUSAL CAVITIES IN DECIDUOUS TEETH.—Flood the cavity with one of the essential oils, and then pack it with gutta percha for a week or ten days. Usually at the end of that time the decay may be taken out with but little discomfort.—*Items of Interest.*

THE HYA YAKA

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No. 7

Dean Webster's Message to the Graduating Class

NOT A PARTING WORD BUT A GREETING

I AM asked to say a parting word to the students. What a responsibility. Words of welcome have in them the joy of anticipation, but words of parting carry with them separation, vacancy, nothingness.

If, when young men left the Dental College, they separated themselves from the work and the life of dentistry there would be good reason for words of parting. The life work of the College is dentistry, all the interests of the Faculty and the students is dentistry. When young men leave college it is only to carry the work in which the College is interested to a broader field. It is to put to the test in the cold world the teachings and precepts of the Faculty. It is not a parting but a welcome into a broader sphere.

It is often a problem in education to know what should be taught and what should be left to experience. Some young men seem to know by instinct what are the wise and what the unwise things to do. Others must have every detail explained to them. Specific and detailed advice given in a public way is generally useless. Advice or related experiences are of little value to anyone unless he is in that period of life when he is capable of appreciating their soundness. It would seem as if every creature must go through all the experiences of all the species of which he is the product. We see this exemplified throughout all life. The child at certain periods has many of the characteristics of other animals of the same age. No one can say to just what height a child will reach in development. With some, deductions are so accurately made from experiences that most of their education is gotten in this way, while others it is only with dint of great effort and constant advice that they are kept from misfortune.

Experience, adventure, discovery and conquest are among the greatest joys of living. A would-be educator who relates all life's experiences in full detail is a menace to human happiness. Then let me welcome you into that broader field of life's activities without taking the keen edge off its pleasures by attempting to tell you what to expect in every emergency. I could tell you of those most likely to welcome you when you take up your life's work in a town or city and what some of their motives might be but this would take from you some of the zest of the game of life.

Advice to be of any value must be in the direction of interest, and since there are some who are never in the mood to accept advice from anyone and others who could not appreciate the advice given and so many others who know all the advice I could give them there is no deed of wasting time on advice. I will not say good-bye nor even a parting word. It is welcome.

The present graduating class has had its course in trying times. There never was a week in all the three years or more when anyone could say what the next move would be. Almost every week one or more of the men said: "Good-bye, I'm off to the war". Now as graduation nears there is only one ambition in the breast of every man—What chance have I to get into the C.A.D.C.? No body of young men could have been more faithful to duty and more zealous to do that which was in the best interests of the country than those who now have been in continuous College session since October 1915. There never was a time in the history of the College when the student body and the Staff were more keenly interested in the one object. The young men who go out this year to serve the public and the nation have a public spirit and carry with them the good-will and the hopes for a brilliant future of a Staff and College which will be ever anxious for their welfare and interested in their future.

Beebe '19—"Why is a drawn tooth like a thing forgotten?"

Drew-Brook '19—"It is out of the head."

Munn '20—"When does a man sleep five in a bed?"

Marion '20—"When he sleeps with his forefathers."

Uneasy lies the head that tells a good many of them.

**ROYAL COLLEGE OF DENTAL SURGEONS
1916-17 HYA YAKA STAFF**



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History of Class '17

BY W. A. PORTER.

CLASSES come and classes go, but still the old College stands with its stately pose—the same to-day as in the fall of 1913 when some 101 youths, with trembling steps, crossed its portals for the first time.

Perhaps a more agreeable assembly of fellows never met before in the halls of the Royal College. After the annual initiation by the sophs a better feeling was made manifest between the two classes. The year passed without discredit to '17. At the close of the session two of the members of the class had passed away, and by the time the second year had commenced the Class was further reduced in numbers as many of its members had enlisted for service overseas.

At the close of the Junior year a summer session was announced by the faculty in order to supply the urgent demand for dental surgeons in the army. An agreement was entered into whereby the men were given the opportunity of continuing their course, during the Summer months on condition that on graduation they would enlist in the Canadian Army Dental Corps, or carry on the practice of a more experienced dentist who wished to go overseas.

Some forty-five members of the Class availed themselves of the opportunity of the summer session and graduated in October 1916, six months before their regular time of graduation. Of these the great majority have assumed the practices of dentists who wished to proceed overseas, thus not reducing the number of practitioners at home. Others have themselves enlisted in the Army Dental Corps, and still others have associated themselves with other practitioners as their assistants.

Fifteen members of the Class did not take the summer course, however, but returned last fall to take the regular session and entered the final year with the members of Class '18 who had also taken advantage of the summer session. With them came a number of men returned from active service overseas. As a result the infirmary assumed a new life and "not a vacant chair was there".

The class has had a memorable history. It began its career at 240 College Street as the largest Freshman class up to that time. It participated in the last of the famous dental "scraps" between the first and second year men. It has the distinction of being the first Class to graduate at the expiration of the only summer course held in the College. Twelve of its members are now on active service. The honour of the school has been upheld both on the athletic field and in the laboratory. The Class spirit has always been the best and its influence will be retained by each member throughout his professional career.

"Let us do our professional tasks well
Both the unseen and the seen,
Make the teeth where caries dwell,
Healthy, entire and wholly clean".

THE BOYS WE KNOW.

We mourn the loss of last year's grads.
Gone out in the world to seek their fate,
Some were so jolly yet some were sad,
Good luck to each one at his own fair grate.

And now we have come to another halt,
In the life of the college surpassing all,
For we are about to lose the braves,
That toil within the infirmary walls.

Here's to the boys of the Senior Year,
With their teething talk and their worldly looks,
Some small, some tall, and some I fear,
Have their heads more full of girls than books.

—TWO ADMIRERS.



Dental Orchestra 1916-17

History of Class '18

BY K. BERRY.

ON October 7th, 1914, a class which will live long in the Annals of the College entered the Royal College of Dental Surgeons. Well do I remember waiting in the corridor, watching old friends exchange greetings, myself without friends; afterwards mounting three weary flights of stairs to receive the first lesson in prosthetic dentistry consisting of making three mixes of plaster.

The Class started out with ninety-four freshies and one freshette, Miss Milne, who from the first day became the centre of attraction for some members of the Class. During the freshman year many lasting acquaintances were made and everyone retains happy reminiscences of those green days. Perhaps the most outstanding events were the Freshman Banquet, Election Night and the numerous half-holidays which are so greatly missed now. With the warmer days came examinations and plans for a profitable summer vacation. Many members became "book agents" and one man in particular made such a handsome income in this way that it was with great difficulty he was persuaded to continue his course.

On returning the following October we found that many of the class had enlisted and were greatly missed by everyone. Although far away they will always be remembered by the members of '18. Our return in the fall was vastly different than our experiences of the previous year. Instead of standing around with long faces, we had a welcome for each other and a proper greeting for the new freshmen. As the sophomore year progressed we learned more about dentistry and it was only then that some members of the Class learned the physiological action of alcohol and the wonderful merits of oil of cloves.

In February the Class was reduced to sixty-five men as more of our members enlisted as they received credit for their year's work on taking an oral examination. Probably the majority of the Class would have enlisted at this time had not the Faculty decided to conduct a special course during the summer months which commenced as soon as the examinations for the sophomore year

were completed. The summer passed uneventful and with a month's vacation in August ended with the usual infirmary quiz and examinations on October 3rd. It will be well remembered by some members of the Class that the Woodbine was open about that time.

Immediately upon completion of exams the Senior year commenced. New members were added and although for a time the Class was divided it now seems as though we had always been associated together. This last year has doubtlessly been our busiest, but in which the greater part of our knowledge of dentistry, be it great or small, has been gained. Under the circumstances which have existed much of the real University life has been lost, but it is with deep regret that we leave the Royal College. As we go forth let us do our best by everyone so that we may not only be a credit to ourselves but to the members of Class '18 and to our Alma Mater.

HOW MEN STICK TOGETHER.

Doctor Bright took a trip to Blackstock last summer and had an automobile accident at a lonely spot on the road where he found it impossible to reach a telephone to notify his wife.

Now, it happened that he was happily married, very domesticated and not accustomed to staying out at night. So at midnight his wife became very nervous. She despatched the following telegram to five of her husband's best friends in the city:

"Jack hasn't come home. Am worried. Is he spending the night with you?"

Soon after this her husband arrived home and explained the cause of his delay. While he was talking a boy brought in five answers to her telegram, all worded thus: "Yes, Jack is spending the night with me."

ELEMENTARY (?) MILITARY KNOWLEDGE.

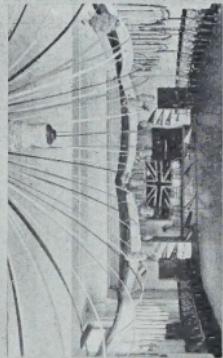
Q.—What should a private do when walking on the street, smoking, carrying a stick and meets an officer?

A.—Throw cigarette away and carry swagger in the hand closest to officer, saluting three paces before officer and in doing so come to a position of shunt.

Q.—Define Trajectory.

A.—Trajectory is the wriggle set up within the barrel by the revolving motion of the trajectory leaving the gun.

ROYAL COLLEGE OF DENTAL SURGEONS
AT HOME COMMITTEE
1916-17



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S. W. SPROULE, 1919-20, Vice-Chairman



A. J. FAUNAN, M.R.C.S., Vice-Chairman



H. J. MURPHY, 1919-20, Vice-Chairman



K. BRADY, 1919-20, Secretary



W. V. LINDSAY, 1919-20, Vice-Chairman

Biographies of Graduates

H. H. ABELL, '18.

*"Tis a very excellent piece of work, madame;
would 'twere done."*

Harold first saw the sun's rays in Owen Sound. He began his early education at Owen Sound P. S., matriculated from Owen Sound C. I. in 1914 and later entered the R. C. D. S. with Class '18.



J. A. ARBUCKLE, '17.

*"Early to bed and early to rise
And you'll never meet the regular guys."*

Born at Pembroke. Moved to Ottawa where he was educated. Entered R. C. D. S. with Class '15. Hockey and soccer representative. With luck should graduate.

A. B. BABCOCK, '18

*"Pleasure hath its time; so, too, hath
wisdom."*

Archie blew in with a snow flurry in 1892. Matriculated from Napanee C. I. in 1912. For two years he wielded the hickory. Entered R. C. D. S. with Class '18. President of Freshman Class. A good worker with lots of pep.



H. L. BALLANTYNE, '18.

"The most objectionable people are the quibbling investigators and the crotchety theorists; their endeavours are petty and complicated, their hypotheses abstruse and strange." —Goethe.



W. H. BARBER, '18.

*"His life was gentle, and the elements
So mixed in him that Nature might stand up
And say to all the world, 'This was a man.'"*

"Bill" discovered America Sept. 20, 1892, and hails from Mount Forest. Matriculated in 1911. Taught three years and entered R. C. D. S. with Class '18. A born dentist and the friend of everyone. Popular with the fair sex and often seen in West Toronto.



J. C. BARKER, '17

*"Leave me here, and when you want me,
Sound upon the bugle horn."*

Early training in the Hudson's Bay Company's wilderness. Matriculated from St. Michael's. Three years in Class '17. Fell before an ardent recruiter and completed the course on furlough.



F. E. BELL, '17.

*"How dull it is to pause, to make an end,
To rust unburnished, not to shine in use."*

—Tennyson.

Earlyby hails from Gormley, Ont. He matriculated from Aurora H. S. in 1911. Registered in Arts in 1912-13, and the same fall entered the R. C. D. S.



K. BERRY, '18

*"Who never felt the kiss of love nor maiden's
hand in his."*

"Ken" made his first oration at Seeley's Bay, 1896. Attended Ottawa C. I. Matriculated, 1914. Treasurer of Hya Yaka. Secretary of "At Home" Committee. His past foretells a brilliant future.



M. G. BRICK, '18.

"He will live such a life that when he dies even the undertaker will be sorry."

Mike first expanded his chest near Kawartha Lakes. Attended S. M. C., obtaining Senior Matriculation. Manager of Rugby, '16. With Intercollegiate champions, '13. Inattentiveness towards women ranks him among successful bachelors.



R. J. R. BRIGHT, '18.

"The only evolution of any really human interest, and worthy of any human regard, is the evolution that springs from resolution and the birth of freedom in the self-conscious soul."—Ed.



J. O. BRISEBOIS, '17

"What is writ is writ; would it were worthier."

"Brise" was born in Ottawa, obtained his matriculation at Ottawa University. Was a member of hockey team, winning his "O," '12. Entered Dentistry, '13. Played goal for Dents' Champion Inter-Faculty Hockey team, '16. He will doubtless do much to lessen the "Root" of most evils of mankind.



J. C. BROOM, '18

*"Rank is but the guinea stamp;
A man's a man for a that."*



Drumleble, Scotland, was the place of Scottie's birth. Graduated, Uddingston Grammar School, '10. Took Medical Preliminary Examination, Glasgow, '11. Spent next four years in Dental Preceptor's office. O. C. Dental Platoon, '16-'17. Member, Xi Psi Phi.

J. L. BURGESS, '18.

*"O, why the deuce should I repine
And be an ill foreboder?"*

First glimpsed the dawn at Doland, South Dakota. Educated at Burgessville, Ont., and Jarvis C. I. Hunted bull moose and surveyed C. N. R. in Northern Ontario, ending up with a year at Queen's University, but finally decided to give up building bridges over rivers to build them over teeth.



A. CHAMBERS, '17.

"The man who cannot enjoy his natural gifts in silence, and find his reward in the exercise of them, but must wait and hope for their recognition by others, must expect to reap only disappointment and vexation."—Goethe.



R. M. CLARK, '18

"An ingenuous youth with a cheery disposition."

Rolly dropped into Dundas one blustering December day, 1893. Matriculated from the High School there. After pursuing various avocations, which did not meet the demands of his ambition, he registered with Class '18.



F. L. COLE, '18

"Never weary in well-doing."

Bowmanville, Ont., boasts his birth on August, 7, 1890. Received Primary School education in Oshawa and Matriculated from Harbord C. I., 1907. Graduated in Pharmacy, '12. Entered R. C. D. S. '14. Sergt., C. O. T. C., '15. Member of Decorating Committee, '16. Frank's experience in business since '13 bids fair for a successful career.



A. F. COLVIN, '18.

"Music has its charms, and so has fussing."

Born in Teeswater in 1893. Matriculated at Wingham. Decided to study Dentistry and entered R. C. D. S. in 1914. During his college course he took a prominent part in athletics. Member of Inter-Faculty Soccer Champions, 1915. Occasionally joined the 400 set.



D. D. COOK, '18.

"Disposed to work, but not to worry."

"Cookie" first met Santa Claus at Zephyr, 1894. Matriculated at Markham H. S., 1912. Entered R. C. D. S. with Class '18. Has played with Dents' Hockey Team ever since. Sporting Editor of Hya Yaka, '16-'17. Success should attend his efforts.

C. A. COYNE, '17

"He will find a way or make it."

He first learned the principles of infant feeding in Clearville, Ont., later moving to Leamington; received his Public and High School education there. Entered R. C. D. S. in 1913 with Class '17. We wish him the success which he richly deserves.



L. L. CROWLEY, '18.

"Lo, several he loved, the loveliest and the best."

Started the high cost of living at the "Maple brook Farm," near Stratford. Matriculated from the Stratford C. I., and, after seeing both oceans, decided to study Dentistry but (never down in the mouth) took to sport as second nature.

R. L. DAVIS, '17.

"Duty is the demand of the passing hour."

Birthplace, Norwich, Ont. Attended Brantford and Collingwood Collegiate Institutes. Taught for a number of years. Was present for two sessions at Indiana Dental College. Entered R. C. D. S. during summer session, 1916, for purpose of serving in C. A. D. C.



F. R. DREWRY, '18.

*"Did he view the world as a vale of tears?
Ah, reverend sir, not he."*

F. R. was born in Warkworth. Matriculated thence a few years later and entered R. C. D. S. A tennis player of note, which resulted in his being Tennis Representative in Dental summer session. He is one of the bright lights and funmakers of Class '18 and also of the Xi Psi Phi fraternity.

H. L. FIELD, '18.

"Variety is the spice of life."

"Bert" was born in 1893. Hails from Mitchell, where he obtained Matriculation, 1910. Attended S.P.S. for two years, and was a commercial traveller for two years. Entered Dentistry with '18. Strong supporter of athletics. Assistant Sporting Editor, Hya Yaka, '16. Manager Dental Inter-Faculty Hockey team. A man with a bright future.



G. V. FISK, '18.

"Brevity is the soul of wit."

Born at Lorneville, Ont. Matriculated Oakwood C. I., Toronto, 1911. Spent three years in business activity. Entered R. C. D. S. '14. Member Students' Council, '14. President Orchestra, '16. Editor, Hya Yaka, '16. Associate Editor of Varsity, '16. Member Xi Psi Phi fraternity.

V. S. FOURNIER, '18.

*"Let a man contend to the uttermost
For his life's set prize, be it what it will."*

—Browning.

Vivian was ushered in at Sudbury, Ont. He attended Public and High School there, matriculating in 1913. Later he migrated to R. C. D. S., casting his lot with Class '18.



C. H. FULFORD, '18.

"As true as steel."

Port Hope, Ont., saw his genesis on July 31, 1895. Attended Port Hope Public and High School. Won H. S. General Proficiency Medal in '12. Matriculated, '14. Entered R. C. D. S., '14. Secretary, Senior Class. Member of Y.M.C.A. Executive, '16. Cece's diligence and perseverance in his work promise him a bright future.



F. J. FURLONG, '17.

*"Thy labours one day shall make thee
great."*

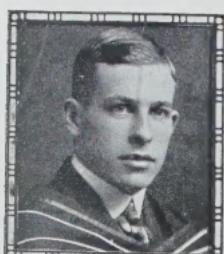
Born Oct. 23rd, 1892, near Jarvis, Ont. Moved to Hamilton, where he received his preliminary education. Entered R. C. D. S. with Class '17. Member of "At Home" Committee in his Freshman and Sophomore years. Member of Xi Psi Phi Fraternity.



R. A. GILBERT, '18.

"He makes a friend where'er he goes."

"Kermish" was born in St. Thomas on July 9, 1895. He matriculated from the St. Thomas C. I. in 1912 and obtained his Honour Matriculation two years later, entering the R. C. D. S., 1914. He is a careful and conscientious operator, and has the best wishes of his many friends.



C. J. HALEY, '18.

Born in St. John, N.B., where he attended Public and High School. Graduated in Arts from University of St. Francis Xavier, N.S., in 1910. Followed the teaching profession. He entered R. C. D. S. in the fall of 1915 and attended the special summer session, 1916.



H. H. HALLORAN, '18.

*"Where'er he met a stranger
There he left a friend."*

Commonly known as "Pete." Born in Guelph, 1895, but Toronto claims him from his early birth. Matriculated from Harbord C. I. Entered R. C. D. S. with Class '18. Treasurer, "At Home." Business Manager, Hya Yaka, '16-'17. His success is assured.



M. J. HOOLEY, '17.

"A cool head and a warm heart."

Joe first tested his vocal chords in Wallace-town, August 22, 1893. He matriculated from Dutton H. S., and after teaching three years, answered the call of Dentistry, entering with Class '17. "Here's good luck to you, Joe."



J. W. INGRAM, '18.

"Genial, alert, a friend worth while."

Born near Mitchell, Ont., Oct., 1893. Matriculated from Mitchell C. I. Graduated from Stratford Normal, 1912, and wielded the birch for two years. Entered R. C. D. S. in 1914. For "Wes," with his ever-ready smile and kind-heartedness, we predict a bright and successful future.



T. INGRAM, '18.

*"He loved music, and also beauty,
The night for love and day for duty."*

"Ingey" was born at St. Catharines, Jan. 1894. He matriculated at Welland H. S. in 1910. Served on Y.M.C.A. and Class Executive for two years and was President of Royal Dental Society and member of Cabinet in his senior year. His congenial personality and ardent enthusiasm assure him of success in his professional and social life.



S. M. JAMES, '18.

"The actions speak the man."

Born in Toronto, 1896. Matriculated from R. C. I. Attended Model School. Entered R. C. D. S. as a member of '18. Member of Hya Yaka Staff '16-'17, also a member of Xi Psi Phi. A great rugby player, and our only original composer of dancing steps and motion. His many friends wish him great success through his career.



F. S. JARMAN, '17.

*"Modest men of merits great,
At self-praise would hesitate."*

Frank set up his first howl with the March winds some twenty odd years ago in Bancroft. Matriculated at McGill University. Entered R. C. D. S. with Class '17. Was on "At Home" Committee in Freshman year. An all-round good fellow.



C. L. JONES, '18.

"Friend to all men; enemy of none."

Jonesey set up his first wail in July, '93. Received his early education at Elora, Ont., where he matriculated. Entered Dentistry with Class '18. A man of quiet, unassuming and cheerful temperament, which are portrayers of a successful career.

W. O. KAUFMANN, '17.

"What's built upon esteem can ne'er decay."

Billie was born in 1890 at Cassel. Received his preparatory education at Tavistock and Woodstock. Taught five years, then entered the R. C. D. S. with Class '17. He was a member of the Inter-Faculty Soccer Championship Team in '15.



D. L. KINZIE, '17.

*"Yon Cassius has a lean and hungry look;
Such men are dangerous."*

Nov. 8th, 1894, saw the most important event of his life at Courtright. Matriculated at Galt C. I. First cast his gleaming orbs at the stately corridors of the R. C. D. S. in 1912.



R. E. LAING, '18.

"Ye are sae grave, nae doot ye're wise."

Dundas Valley was the scene of his childhood. He registered with '18, after holding various positions. Leader of the College Orchestra for three years. Naturally quiet, he made many friends. We wish him good luck.



J. T. LEBBETTER, '18.

*"He has some fame, some talent, some religion
and some philanthropy in his head."*

Born in North Sydney, N.S. Matriculated from St. Francis Xavier College. Vice-President, Senior Year, and member of Hya Yaka staff. His keen intellect, clear cut phrases and extensive vocabulary bespeak his brilliant mind.



W. C. LEGGETT, '17.

"Desperate evils demand desperate remedies."

Born at Newboro, Ont., Sept., 1893, "Chief" matriculated, Athens, 1910. Dentistry, '12. Member College Orchestra; Champion Inter-Faculty Track Team, '12; Mulock Rugby Team, '12-'13; Varsity Seconds, '14. Active service, Dardanelles, Egypt, Balkans and France, '15-'16. Member of "At-Home" Committee and President of Rugby Senior Year.



H. D. LEUTY, '18.

*"Large in stature, broad in mind,
Doug. is one of the right kind."*

Born, June 15, 1893, at Malton, Ont. Received his matric. from Humberside C. I. Afterwards attended Normal and taught two years. Was member of "At Home" Committee in Sophomore year and Vice-President of Junior year. Member of Xi Psi Phi. Doug. has won the esteem and good-will of his fellow-students.



J. L. LONG, '18.

"The first use of education is to enable us to consult with the wisest and the greatest men on all points of earnest difficulty."—Ruskin.



H. U. MARANDA, '18.

*"And never did Grecian chisel trace
A finer form or lovelier face."*

Born in Plantagenet in 1894 and began the study of Dentistry in the fall of '13. On "At Home" Committee and Senior Representative of the R. D. S. His genial disposition won him many friends and it should prove a great asset for him in years to come.

J. E. McCUTCHEON, '18.

"Much may be made of an Irishman if he is caught young."

Jimmie was born at Honeywood in 1898, and after completing his H.S. course at Shelbourne and Elmvale, he came to study Dentistry at the early age of "sweet sixteen". Since then he has acquired considerable knowledge, skill and a moustache, and so appears quite capable of practising dentistry.



C. A. McDONALD, '18.

"Patience so predominant in your nature."

The first rays of light beamed on "Mac" in Toronto. He began his early education at St. Helen's School and later entered De La Salle Institute. He matriculated in 1912. After a lapse of two years he cast his lot with Class '18.

P. MCINTYRE, '17.

"Not wholly in the busy world, nor quite beyond it."

"Mac" first beamed on humanity near Ailsa Craig, Ont., and received his early education there. After matriculating at Parkhill, he wielded the birch for two years and then responded to the call of Dentistry. We anticipate a bright future for him.



L. S. McLACHLAN, '18.

"To strive, to seek, to find, and not to yield."

Stanley was born in Listowel, Ont. Here he spent his boyhood days in Public and High School. Upon graduating he continued his studies at the Hamilton Normal, where he received his license to wield the rod. Dentistry claimed him, and in the fall of 1914 we find him registering at the R. C. D. S.



M. C. MILLS, '17.

"And while it was yet early, he arose and went to a far lecture."

Born at Schomberg, 1895. The schools at Bradford and Tottenham furnished him with the requirements to enter R. C. D. S., 1913. Out a year, Millsy has kept affections a secret throughout his college career, but "still waters run deep."



M. E. MILNE, '18.

*"With gentle, yet prevailing force,
Intent upon her destined course."*

Born in Markham. Matriculated from North Toronto H. S. Entered R. C. D. S. with Class '18. Her winning ways predict a bright future.

R. J. MONTGOMERY, '18.

*"Song, music, mirth and laughter,
Ladies first and—ladies after."*

"Monty" first smiled at Blackstock, July 24, 1895. Matriculated from Lindsay Collegiate. Spent one year in Arts. Later finding Dentistry his calling, he entered R. C. D. S. with Class '18. Member of famous "Harmony Four" Orchestra and Y.M.C.A. Executive. Success awaits him in Dentistry.



H. J. MULLETT, '18.

*"His hair is red and his eyes are blue,
But a man's a man for a' that."*

Born January, 1892, Castleton, Ont. Matriculated, Colborne C. I. Attended Normal School, Regina. Entered R. C. D. S., 1914. President Senior Year and Y.M.C.A. Member "Harmony Four" Quartette.

M. J. MULVIHILL, '18.

"Do unto others as they would do unto you, only do it first."

"Mike's" sweet tenor voice first disturbed the peace in Arnprior. Matric., A. H. S. Two years Arts, Ottawa University. Entered R. C. D. S., '14. President Rugby and Hockey. Captain Junior Dents. From head to foot he is true blue and has a swell girl named "Babe". Wears everybody else's clothes but his own. Is a member of Xi Psi Phi Fraternity.



H. J. MURPHY, '18.

*"One who where'er he moved
Drew after him the hearts of many."*

Born at Mount Forest, Jan. 31, 1892, and matriculated from the High School there. He entered R. C. D. S., where his ready wit and cheerful disposition won him a host of friends. Secretary of Freshman year. Secretary of Hya Yaka and President "At-Home," Senior Year. Success.

G. R. MURRAY, '18.

"He loves a joke, a quiet smoke and friends to call around."

Born in Strathroy, Ont. Matriculated S. C. I., 1907. Ranched in Alberta seven years. Entered R. C. D. S., 1T8. Vice-President of "At Home." Member of Xi Psi Phi.



A. MYLES, '17.

"A Westerner with a Western stride."

Born, Treherne, Man., June 7, '91. Matric. at Treherne H. S. Entered R. C. D. S. in '13-'14. Representative to R. D. S. in Freshman year. Vice-President of Second Year and served two terms on Hya Yaka staff. Became a member of the Xi Psi Phi in Sophomore Year.



R. L. NESBITT, '18.

"Will there be any stars in my crown?"

Nebbie first saw the light of day in Carleton Place, 1891. Matriculated from Napanee Collegiate. Started the study of Dentistry in 1913. Somewhat of an orator. Musically inclined. Leader of R. C. D. S. famous "Harmony Four". On Hya Yaka staff for two years.



L. R. PARR, '18.

"A gentleman—always."

Born in the spring of '95, Leo spent his early days in Warren, Pa. Educated at Warren and later at Masten Park C. I., Buffalo. He entered the R. C. D. S. with '17. Quiet, unassuming and industrious, he is bound to succeed in his profession.

L. R. PATTISON, '18.

*"Unblest with outward grace,
His rigid morals stamp'd upon his face,
While strong conceptions struggle in his
brain."*

"Pat" was born near Fergus, Ont. Obtaining his Normal Entrance there in '13, Dentistry claimed him the following year. Persistence and sincerity mark well his actions.



S. PEARLMAN, '17.

"Palmam qui meruit ferat."

As late as 1890 Samuel heard the music of the spheres and began to buffet the mortal ills of this world. His "forte" has been championship rugby and basketball teams. He is a self-made man and deserves exceedingly well of fate which has so happily inducted him into the dental art.



J. A. PLUNKETT, '17.

"All in all, he's a problem to puzzle the devil."

"Plunk," alias "The Prince," was storked at Ottawa, but spent the early part of his life at Aylmer, Que. Matriculated from McGill University. Became restless, so decided on the study of Dentistry. With the assistance of an alarm clock, he hopes to graduate. Member of Xi Psi Phi Fraternity.



S. L. PHILLIPS, '18.

"Man's noblest gift to man is his sincerity, for it embraces his integrity also."

Born near Dundalk, Ont. Attended H. S. in Orangeville and Normal in Hamilton. Wielded the birch for four years. Captain of Inter-Faculty Soccer Champions last year. President of junior year and President of athletics in his senior year. A member of Xi Psi Phi.

W. A. PORTER, '17.

"His heart went out to those in trouble."

Dec. 6, 1891, the stork left Bill at Smith's Falls. Matriculated in 1912 and decided to become a "Mender of Bad Teeth" with Class '17. Elected Vice-President for junior year. Spent eight months in the A. M. C. Took the summer course with Class '18.



H. W. REID, '18.

"None but himself can be his parallel."

Born Varna, Ont. Attended Collegiate and Model at Clinton. Instructed the young minds for two years. Member of Cabinet for three consecutive years, as President of Sophomore year, Treasurer of Parliament and President of Parliament. How is a fine athlete, being the crack goalie of the Championship Soccer Team. Member of Xi Psi Phi Fraternity.



J. M. REVELER, '18.

"Lost a bet once."

Mac. was born at Cannamore, Ont., Nov. 20, 1895. Matriculated at the Norwood H. S., 1912. One year in Arts at Victoria. Member of the Class Executive for lacrosse. Also played rugby and took an active interest in all sports.



E. J. ROBB, '17.

"A big, broad man whose face bespoke an honest heart within."

Born at Lochalsh. Educated at Kincardine C. I., later spending a term at Stratford Normal. Taught three years and entered the Royal College in '13. Was Vice-President of the Students' Administrative Council in his senior year.



H. C. ROOS, '18.

"The essence of knowledge is, having it, to apply it; not having it, to confess your ignorance."—Confucius.



J. V. ROSS, '18.

"Young in years, but not in knowledge."

First began his career in Brussels, Ont., in 1896. He matriculated at Brussels Continuation School and entered R. C. D. S. in 1914. Member of the Inter-Faculty Champion Dent. Soccer Team, 1915-16, and Jennings Cup Hockey Team of the same year. He also won a place on the University Tennis Team, where he won his "T".

J. RYAN, '17.

"A model student, yet a prince among his fellow-men."

Joe was born in Brampton, Ont. He matriculated from Brampton H. S., and entered the R. C. D. S. in '13. During his course his popularity won for him many offices, viz.: "At Home" Committee, Senior Member of Joint Committee and elected President of the Senior year for the summer course.



S. V. SAUNDERS, '17.

"To strive, to seek, to find, and not to yield."

"Stan" hails from the Ottawa Valley, first smiling at Smith's Falls, 1894, where he matriculated, 1913. Entered R. C. D. S. with Class '17. His quiet, unassuming manner gained for him many friends. Success is assured.

J. M. SHELDON, '18.

"Methinks he is a true friend."

"Mac" hails from Chatham. Entered R. C. D. S. in Class '18. Took an active part in athletics. Member of Varsity Junior O. H. A. Champions, '14, for which he was awarded his "T". Captain, Aura Lee Junior O. H. A. Champions, '15. Genial, gentlemanly and conscientious, he is assured of a great future.



G. M. SINGLETON, '17.

"A good companion and as firm a friend."

"Singy" first saw daylight at Toledo, Ont., 1894. Matriculated from Smith's Falls C. I. Entered Dentistry with Class '17. On The Varsity and Hya Yaka staffs. He is bound to succeed.



H. R. STEWART, '17.

"A modest man."

In 1908 completed his preliminary education in the town of Bradford, from whence he started out as school teacher, of which he soon tired and decided to embark in Dentistry, in which we hope he will have every success.



R. A. STRATHERN, '18.

"Ye are sae grav'm nae doot ye're wise."

Born, Glasgow, Scotland, 1887. Landed in Canada, '97. Graduated from Westport H. S., 1907, attending Athens Model School in the fall. Spent seven years in pedagogical and commercial pursuits. R. C. D. S., '14. Member Senior Inter-Faculty Soccer Champions, '15.

N. B. TEMPLE, '18.

"For no ill could dwell in such a temple."

Toronto born and bred. Matriculated from St. Michael's College, followed by two years in Arts. Wearied of Philosophy and Languages, he registered with Class '18. Success is sure to follow him.



L. THOMPSON, '18.

"There's all of honesty, manhood and good-fellowship in thee."

Born at Perth, Ont. Matriculated from Perth C. I., 1910. Graduated from Normal, 1911. Entered R. C. D. S., '18. Enthusiastic athlete. President, Track Club, in Senior year. Member of Xi Psi Phi.

M. THOMPSON, '18

"He is a burning and a shining light."

Alighted in Smith's Falls, June 23, 1894. Matriculated in 1913. Wielded the "staff of knowledge" for a year. He retired for a while and finally decided to aid in the "illumination" of Class '18. A square fellow.



J. E. TRUEMNER, '17.

"If it is worth doing at all, it is worth doing well."

Registered his first kick, Feb. 19, 1892, at Dashwood. Attended Crediton H. S. and Hamilton Normal. After serving two years as a pedagogue, he joined Class '17 of the R.C.D.S. Ambitious and conscientious, he is sure to make a success of his chosen profession.



N. P. TRUEMNER, '18.

"Unassuming, sincere and aye a man."

"Trim" hails from Hensall, Ont. Matriculated from Seaforth C. I. before enlisting in the ranks of Dentistry in 1914. Active member of Y.M.C.A. executive. His energy and keen judgment ensure him success in Dentistry.



L. T. VEITCH, '18.

"In fact in most respects he's well behaved."

Lloyd received his early education in Port Elgin and after matriculating entered the banking profession, which he followed for a few years. Entered R. C. D. S. in 1914.

H. B. WALKER, '18.

*"Formed on the good old plan,
A true, and brave, and downright honest man."*

Brock was born at Malton, Ont., and being a son of the Methodist parson was quite a globe trotter. He attended High School at Newmarket and Brampton, and after a year spent in teaching school, decided to study Dentistry. A genial, kindly disposition, and a good share of caution will help to bring him success.



J. G. WHITE, '18.

"Work never killed a man yet."

Born at Madoc, and here attended Public and High School. Secured Matriculation at Midland, and after five years of varied occupation, enrolled at R. C. D. S. with Class 1T8. He is a conscientious worker and a worthy friend. Here's to his success.



S. G. WHITE, '17.

"A mind to conceive, a hand to execute."

Stan. blew in with the snowflakes December 1, 1895, at Caintown, Ont., where he received his preliminary education. Matriculated from Gravenhurst in 1912 and entered the R. C. D. S. with '17. His well-bred manner won him popularity among his classmates and ensures future success.



C. J. WOOD, '18.

"His friends were many; he knew no foe."

Clair first smiled on the world at Exeter, 1896. Attended Exeter High School, matriculating 1913. Entered R. C. D. S. 1914. His congenial manner and original wit won him many friends.



D. YOUNG, '18.

*"He was a six foot o' man, A1,
Clear grit and human nature."*

Dan first raised his melodious voice Oct. 1892, out on the rolling prairies. Matriculated from Yorkton C. I., and after instructing the young for one year, entered R. C. D. S., where he was one of the most popular members of 1T8. Closely associated with Y.M.C.A. and President of Basketball in '17.



E. C. YOUNG, '18.

"So wise, but not so still."

"Cec" was claimed by Ennismore in 1896 where he received Matric. Rambled to St. Michael's for Senior Matriculation, finally decided on Dentistry with Class '18. A successful future awaits him in his professional career.



W. YOUNG, '18.

Born at Guelph, Ontario. He received his early education at Guelph Public and High Schools. After graduating from School of Science, Toronto, 1910, he spent four years along the trail of '98 in Northern British Columbia, entering Dentistry in 1915.



THE CABINET

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Royal College of Dental Surgeons 1916-17



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President of Parliament



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G. V. FISKE
Editor in Chief of Yoko

THE HYA YAKA

A JOURNAL PUBLISHED MONTHLY DURING THE COLLEGE YEAR
BY THE STUDENTS OF THE ROYAL COLLEGE OF
DENTAL SURGEONS OF ONTARIO

Vol. XVI.

TORONTO, APRIL, 1917.

No. 7.

Editorials

THE closing College term witnesses the departure of still another class of graduates from the Royal College—the second largest in the history of the school. Three years ago the majority of the class were freshmen looking forward with eager anticipation to the time in the seemingly distant future when we should have attained the dignified position of seniors. With the outbreak of the war many of our classmates heeded the call to their country's service and passed from us. Afterwards came the opportunity of graduation a year in advance of our regular time by continuing our course through the summer months. Then, at the beginning of the fall session the members of Class '17 who did not take advantage of the summer session joined us and the two classes became amalgam—ated.

How quickly the time has passed. The long-looked-for time of graduation has become a reality. It is doubtful, though, if it has brought with it the same measure of anticipated jubilation, but rather a recognition of the responsibility resting upon each individual member in the rendering of adequate service to those entrusted to our care, and a realization of the amount of further study and practice before any positive approach to the high ideals, which have been placed before us during our College careers is made. We are passing out into a larger sphere of usefulness and service in a profession which is second to no other; a profession which during the past few years has made such rapid progress that the public now recognize it to be one of the greatest benefactions of mankind, if rightly practised. Unfortunately there are a few older practitioners who think dentistry as it is taught to be entirely different from dentistry as it is practised, and it is up to the profession, especially the more recent graduates, by applying the basic principles learned while undergraduates to aid these men to obtain a larger perspective of the profession.

Many of us will look back upon our undergraduate days as the best and most pleasant of our lives. The friendships and associations formed during that time will long remain deeply rooted in our memories. Although our last year has been our busiest, it has been the best. During this year, we have been brought into closer contact with our faculty. Instead of the learned pedagogues which we had pictured them in our freshman days, we found them true friends, congenial companions, not only ready and willing at all times to assist us when in difficulty, but prepared to forego the pleasures of a vacation during last summer in order that a large number of dental practitioners might be provided to meet the exigencies of the time. We leave our Alma Mater with mingled feelings of gladness and regret, glad to pass beyond the bounds of restraint yet sorry to bid farewell to an institution which has meant so much to us. The formation of an Alumni Association has been considered at various times and it is hoped that in the near future definite plans may be formed in order that an element of loyalty to our Alma Mater may be crystallized and another medium provided whereby each graduate may keep in touch with the later developments in dental science.

Owing to the present unsettled condition and the extreme cost of living most of us will not be seriously considering the purchase of Packard or even Ford cars, nor contemplating the engagement of the services of a matrimonial bureau.

It may not befall the individual lot of every graduate to obtain a commission in the Army Dental Corps, but many will carry on the practices of practitioners who have gone overseas. In the event of the enforcement of the Militia Act we shall be in a position to care for the dental ills of those enlisted, confident that none of our number will be a discredit to those to whom we are indebted for the grounding in our chosen profession.

A Word of Appreciation

The editor-in-chief wishes to express his appreciation of the co-operation and willing assistance shown by the members of the HYA YAKA staff during the term, whose earnest efforts have aided so materially in the production of the magazine. Through the work of our business manager the financial condition of the journal has considerably improved. The assistance and interest of the members of the faculty and students have also contributed largely to the success of the magazine.

Y.M.C.A. Executive 1916-17.



Limericks

H. Harold Abell hails from Owen Sound
Where there's ladies he's surely around.
With an expression stern when it comes to his turn
Amongst the grads. his name will be found.

There's a man—J. A. Chambers Arbuckle—
Who oft to himself he would chuckle.
He'd pull a molar with ease, using forceps or keys,
And not a patient e'er bit his knuckle.

Oh, Arch. B. Babcock is well-known,
In the city he's got a second home.
He attends all the dances, never heeding finances,
And his work is all good, as he's shown.

Laurie Ballantyne from Listowel came,
His manner is always the same;
He has not much hair, but then with the fair
He is always sure to win fame.

There's that young man Bill B. Barber
Who taught school three years like a martyr;
Now he's taken his degree in Dental Surgery,
And there ne'er was a graduate smarter.

J. C. Barker returned from the fight
That his course at the College he'd not slight.
He'd fit cases most rare with diligent care
But eight-thirty speils, well good-night!

Frank E. Bell is an easy-going chap,
For lady patients he doesn't give a rap;
He walks up and down, on his forehead a frown,
But his inlays fit in with a snap.

Ken. Berry's a chap as you know
Cares not for a ridge high or low,
For he takes things easy, mounts his case on the Gysi,
As for his moustache—it's still on the go.

Mike George Brick is not so slow;
His good work the demies all know;
Sold his engine, made ten, paid his room-rent and then
With the balance attended the show.

Our Doc is a man called Bright,
Whom his wife has an eye on at night;
At the hockey game, he's there just the same,
But so is his wifie alright.

J. O. Brisebois from Ottawa's shore
Has missed lectures more than a score,
In his work at the school he has made it a rule
To do his best—then some more.

Of operators in the room,
The smoothest one is "Scottie" Broom;
His work is neat—details complete,
He'll be a comer very soon.

There is a young man named Burgess,
Who works when necessity urges;
You can't make him mad and his work is not bad,
Although done in splashes and splurges.

"Pop" Chambers is a short young man,
And his head is as bald as a can;
He thinks he's quite smart when the freshies' best art
With a critical eye he does scan.

"Rolly" Clark without a doubt,
We all think is a good scout;
Jolly and gay, works all the day,
At night he always goes out.

Cole is noted for brilliancy.
He graduated in Pharmacy;
But mixing dope had for him no scope,
Now he's gone into Dentistry.

A. F. Colvin with religious smile
Claims Knox as his domicile;
At a church tea he proves to be
A good fellow—you know the style.

There was a Dent student named Cook,
Who didn't learn hockey from a book;
As could be easily seen, he was a follower of the dean,
And he'll get there by hook or by crook.

From Leamington came Clare A. Coyne,
Whose ancestors crossed the Boyne;
Sure a history like this doesn't make a dentist,
But his patients all say, "That is foine!"

Next is a fellow named Crowley,
Knows all that's profane and holy;
Practised dentistry with intensity,
But would sooner lay "ten" on a pony.

From Indiana R. L. Davis came,
When he heard our College had fame;
He borrows and lends to all of his friends,
In Orthodontia he'll excel just the same.

A tall fair prince is Drewry,
Plenty of admirers has he,
With a great many graces, but poor memory for faces.
When he starts he works just like fury.

In our year is Manager Field,
The forceps he surely can wield;
But while managing hockey, his team got too cocky,
And lost Mr. Jennings' prize shield.

G. V. Fisk is our editor you see,
He's always as busy as a bee;
When us he does leave we know he will "Grieve",
And some day an Orthodontist may be.

Vivian Fournier is mild and serene,
His work is fit for a queen;
Fills molars with foil gold so we are told,
And much of the world he has seen.

Cece Fulford our secretary is
Who looks after the class "biz";
He is calm and sedate, seldom comes late,
But lectures on him do not fiz.

France Joseph will hold you awhile,
In lineal measure there are three to a mile;
His last name's Furlong and in study he's strong
And he's seldom seen to smile.

Roy A. Gilbert makes it his aim,
To never worry and be always the same;
At the head of the class, he is sure to pass,
But for pleasure he too is game.

Charles Haley's not given to talk,
In a race he wins with a walk;
We have to relate made a "universal plate"
Which gave the profession a shock.

"Pete" Halloran is brave and bold,
Although young he is quite old;
Has many fads of gathering "ads"
That our journal may be sold.

Joe Hooley is quite a case,
A smile sure he wears on his face;
He's never unruly, often late unduly,
In the C.D.A.C. may find a place.

Wes. Ingram's the same all the while,
When in trouble he's there with a smile;
Inserts fillings with ease which the ladies all please,
Not fancy but always in style.

Thornton Ingram is known by his dress,
A craze for dancing he does possess;
The dental society has gained notoriety,
While "Ingy" was president of R. D. S.

S. M. James, who is just known as "Stew,"
On his lip a moustache grew;
"I know it is there", said our friend with fair hair,
"I can feel it, I just counted two."

There's a chap called Franklin Spur Jarman,
Who didn't go West to do farmin';
When he saw all the ground, he had to look round
To decide which profession he'd star in.

There's quite a young chap from Elora,
Yes, Jones is his name, begorra;
With his head all aflame, he has made quite a name,
For the village where dwells his dear Nora.

Bill O. Kaufmann is his whole name,
To be a dentist, to Toronto a-came;
Soccer playing's his line, at the game he does shine,
We hope in dentistry he's the same.

Vern Kinzie from Galt did hail,
His body sure looks quite frail;
He ne'er seems to worry, but generally in a hurry
And at dentistry he'll make some kale.

Laing from the valley city,
Lacks in poetic ability.
But a limerick he made to G. Vernon evade
And now he can rest in tranquility.

In our year's a man named Lebbetter,
From his operation didn't get quite better,
He thought it best, to take a rest
For a year until he got fatter.

W. C. Leggett's just back from the war,
With tales of Gallipoli's shore;
But not long round home does he wish to roam,
He hopes to get back with the "Corps".

Tall, dark and thin is Doug. Henry Leuty,
Who never forgets his duty;
There's a gay young pixy who lives out in Dixie,
Whom Douglas thinks is a beauty.

A studious man is J. B. Long,
He dances and sings us a song;
He travelled down east to sing at a feast,
And won the heart of a maid in the throng.

McCutcheon sure likes to skate,
And his knowledge just crams his pate;
But as a "fusser" there never was "wusser",
He's real clever we will have to state.

"Cece" McDonald has curly hair,
When lectures begin he's never there;
But to be exact you should see him extract,
With the forceps he sure is a bear.

There's a chap who's known as "Pete",
McIntyre's his name complete;
At an 8.30 lecture, you can safely conjecture,
That his won't be a vacant seat.

McLachlan, commonly called Lorne,
To be a dentist was born;
His joy partials to plan and bridges to span,
His diploma now he'll not scorn.

Hubert Maranda's tastes are vivacious,
At the piano was madly rapacious;
He used dope on his hair and to dance was a bear,
But at plugging exams—oh my gracious!

Next there comes a tall dark god,
Who was born on Schomberg sod;
Morris Clarke Mills, cures all dental ills,
His work the clinicians do laud.

Marjorio Milne is a girl so neat,
Every day 'tis she that we meet;
When in search of more knowledge, she came to our College,
And all agree she's real sweet.

To our College came happy young "Monty",
Singing songs so noisy and jaunty;
He's fond of the rule for he used to teach school.
Likes dancing with "Patsy"—now don't he?

Mullett's is the voice that oft soars,
In the lab. and corridors;
The hue of his hair with the rose can't compare,
Lost teeth he most quickly restores.

There's Mulvihill a prince among men,
A sterilizing specialist and then
Of inlays with posts and bridges he boasts,
And of dentures which none can condemn.

H. J. Murphy arranges our dances,
His manner the ladies entrances;
But longing to roam, rather than stay "At-Home",
With our hockey team took chances.

There's a short little nipper called Murray,
Who ne'er seems to be in a hurry;
He went to Detroit, nearly causing a riot,
But he'll get his degree, don't you worry.

From Treherne, Man., comes Allan Myles,
The worry of life ne'er him riles;
With his blowpipe he plays and turns out inlays
That make his patient all smiles.

“Nebby” came from down Napanee,
To see Toronto and learn dentistry;
When asked “Are you busy?” says “Yes, I’m just dizzy,
But I hope I get my degree.”

From Buffalo comes Leo Parr,
A specialist in lowers with bar,
Does his casting with steam, which fit without seam
The profession he’ll surely not mar.

Pattison in Guelph was born,
A lonely place “for-lorn”;
Came to Toronto, he didn’t want to
But dentistry he wished to learn.

Perlman’s a fellow from Dents,
Possessed of all sorts of queer bents;
All day long he could stare at a girl in his chair,
But yet he has good common sense.

“Stan” Phillips’ dashes around quite fraught,
With an ardour to do what he ought;
He’s good to play soccer, ne’er will be a knocker,
And a jolly good chap, is he not?

Oh, who is the fusser of the Senior year,
The man who never could swallow a beer;
’Tis J. Allan Plunkett, no one would have “thunk” it,
His fussing may cause trouble, we fear.

“Bill” Porter from Smith’s Falls, too,
His name creates a thirst ’tis true,
He would fillings insert with very little hurt
And of friends he has not a few.

Next in line is Harvey Reid,
A friend you will find when in need;
In soccer he led, now of Parliament the head,
He's a busy fellow indeed.

Reveler by name and nature,
Knows the dental nomenclature;
There's no fellow leveller, than J. Mac Reveler,
At picking winners from the paper.

Edgar J. Robb is a good chap,
For fussing he cares not a snap;
He likes a square meal and is chuck full of zeal,
A moustache he wears on his map.

Now there is a boy named Roos,
To describe him would be of no use;
A form divine, he loves to entwine,
He can do it without an excuse.

J. V. Ross is an all-round Sport,
With the hockey puck he did cavort;
Then there's soccer and baseball and tennis, he plays them all
But make dentures, he'd do nought of the sort.

There was a young man named Ryan
For long walks would continually a-pine;
On the start so they say, he would feel all O.-“K”,
Now some girls must be just fine.

Now Saunders is a man of learning,
But for a sweetheart is always yearning;
If the girlie is fair, he is surely right there,
Midnight oil he's forever burning.

“Mac” Sheldon ought to have a degree,
For playing clean hockey you see;
When the dentals went west, he played at his best,
And helped bring the cup back say we.

Now Singleton comes from Smith's Falls,
He loves to frequent our College halls;
Has an appearance serene as he walks with a queen,
Is a believer in frequent calls.

H. B. Stewart is our next name,
To lectures late he often came;
His studies are light as he goes out at night,
But early he always comes "hame".

"Bob" A. Strathern doesn't mind knocks,
So we'll remark on his fancy socks;
When the class is in session for a lengthy discussion,
"Bob" takes the platform—and talks.

N. B. Temple is our man of letters,
He often differs with his betters;
To draft notes of large size he's sufficiently wise,
So he's consulted on all class matters.

Lawrey Thompson hails from Perth,
Is the emblem of good mirth;
He has increased his knowledge by his work at the College,
And he'll soon find out what it is worth.

M. A. Thompson with manly stride,
Is another of Smith's Falls' pride;
On the ladder of fame, with his head in a flame,
But we think that it is only dyed.

J. E. Truemner ne'er combs his hair,
For one thing there isn't much there;
A good worker, they say, who'll get his degree in May,
And that smile he will always wear.

Norman Truemner's a right good fellow,
Whose voice we know is quite mellow;
To his work he does apply, a bright future we prophesy
To this youth from Hensall, Ontario.

L. T. Veitch, our prosthetic man,
Works as hard as ever he can;
His patients wait while he polishes a plate,
And his wisdom rivals the Koran.

His name linked with wars of old,
H. Brock Walker, we are told;
Is a minister's son, but is cuhck full of fun,
And teeth loves to fill with gold.

"Jim" White, the man of vocations,
Has had many high aspirations;
He travelled by rail then learned to sail,
Now, dentistry has won his elations.

On the ladder of fame if we see right,
Is that Gravenhurst youth Stan. White,
With a satisfied air—he doesn't seem to care,
How late he stays out at night.

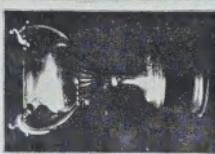
"Woody" now hoves in sight,
Letters he often does write;
To the only girl whom he thinks a "pearl",
And he stays in to study at night.

Now Dan Young's a basket tosser,
A good student but also a fusser;
His broad Western smile, would the fairest beguile,
All he needs is a height reducer.

Now Cecil Young has been sick,
And with '18 decided not to stick;
He has girl friends galore and is looking for more,
And wants a rest to take his pick.

W. Young's age to guess, we try
As our plump friend passes by;
It puzzles all day the girls, so they say
It's no wonder we oft hear them sigh.

DENTAL HOCKEY CLUB



WORLD'S AMATEUR CHAMPIONS



Dental Hockey Club

BIOGRAPHIES OF PLAYERS.

DR. JERRY LAFLAMME—His ability and past record too well-known to make any comment.

CAPT. JIMMY STEWART, left wing, earned fame with Kingston C. I. Last year with Argos. Has been running in hard luck with water on the knee.

WILLARD BOX, right defence, a product of the Belleville Junior O.H.A. team. Last year with Queen's, where he became famous.

MAC SHELDON, left defence, began his career at Chatham on two junior O.H.A. championship teams. First year in Senior hockey.

CHARLIE STEWART, goal, another Kingston boy. Played goal for Argos later part of last season. Not much bigger, but better than ever.

E. W. HODGINS, rover, Orillia saw his first hockey endeavours, and where his prowess is well-known. A newcomer in Senior hockey, but coming fast.

RUPERT MILAN, centre, one of a family of hockey players from Kingston. Played with Frontenacs last year. He gets goals—his chief asset.

FRANK DOYLE, right wing, learned the game with St. Michael's College. First year in Senior O.H.A. Never gives up trying.

R. SMILLIE, right wing, Sudbury gave him his first chance to make good in hockey. Made good with I. C. C. juniors two years ago. Looks like a find in Senior O.H.A.

THESE MALE LADIES' MAIDS.

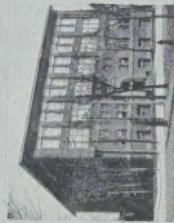
"Please hurry," said Mrs. Bright, impatiently to Robert. "Haven't you ever buttoned a dress behind before?"

"No," replied "Doc" with some asperity. "You never had a dress that buttoned before behind!"

Plunkett '17: "I say, Mike, these Russians have the funniest names, haven't they? Michalovitch, Androvitch, etc."

Mulvihill '18: "That's so, Jimmy, you can't tell vitch is vitch."

DENTAL COLLEGE SOCCER TEAM
1916-17
Interfaculty Champions.



Dental Soccer Team

BIOGRAPHY OF PLAYERS.

PHILLIPS, STANLEY JAMES, SR., learned the game at Orangeville High School. Since then he has played in the Southern Saskatchewan League, and in the Western Football Association. Since coming to the R.C.D.S. he made the Varsity II's. and last year captained the Dents Interfaculty Championship team.

THOMPSON, LAWRENCE, played his first soccer at Perth Collegiate Institute. Since coming to R.C.D.S. he has played with all the soccer teams, last year with the Interfaculty Champions.

ROSS, JOHN VERNON, learned the game at Brussels. He has played with Dents since coming to the R.C.D.S., was also a member of the last year Interfaculty Championship team.

COLVIN, ANDREW FRED first played soccer at Wingham High School, also played with the winners of the Hough Cup in 1914.

REID, HARVEY WILSON, learned the game at Clinton Collegiate Institute. He played with the Bruceville Rovers and in the Intermediate Western Football Association. Since coming to the R.C.D.S., played with Varsity II.

KAUFMANN, WILLIAM OLIVER, first broke into soccer at Castle, Ont. Before coming to R.C.D.S. he played with Woodstock Collegiate Institute team, and with Tavistock Juniors and Seniors in Western Football Association.

ROOS, HARRISON CHARLES, learned to play soccer in Listowel. He played with Listowel in the Hough Cup Game was also a member of Atwood Junior Champions and Listowel Intermediate Champions. Since coming to the R.C.D.S. he has played with Varsity I.'s '15-'16, also with last year Interfaculty Champions and was this year captain of the team.

LIPPERT, JAMES FERGUSON, played his first soccer at Woodstock Collegiate Institute. Before coming to the R.C.D.S. he played with Woodstock and Tavistock in Western Football Association. During his college career he has played with Varsity II.'s and was a member of last year Interfaculty Champions.

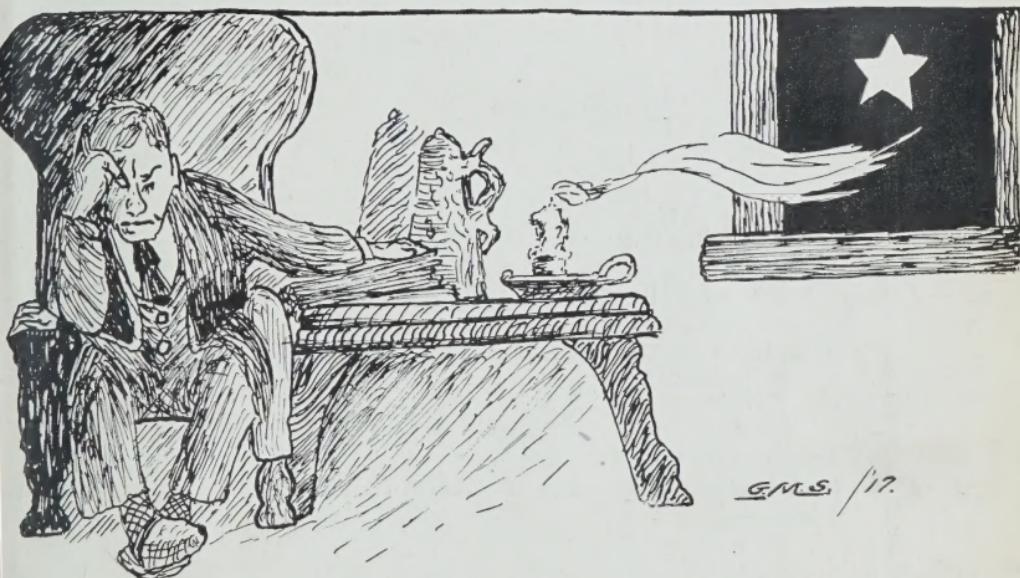
MCCANN, learned the game at Perth Collegiate Institute. He has played with Dents for two years, was on last year Champions.

DAY, HARRY ROY, played his first soccer at Wingham High School. He played in Hough Cup games.

SMYTH, WILSON DUNN, learned the game at London High School. He played in London City League and W.F.A.

BABCOCK, FREDERICK EARNEST, before coming to R.C.D.S. played with Napanee Collegiate Institute.

BUTLER, FORD APTED, learned the game at Aurora High School.



Only a Singal Star!

Ryan '17: "I guess Fisk won't need to Grieve with a Howes and a Cook."

SCOTTICISM.

McTavish and Macpherson are adrift at sea in an open boat.

McTavish (on his knees): "O Lord, I ken I've broken maist o' Thy commandments. And I've been a hard drinker all my days. But, O Lord, if we're spared this time, I promise never——"

Macpherson: "I widna commit mysel' ower far, Donald, I think I see land."

Advertisers You Should Patronize

Barber Shop—Kennedy, Co., E.M., 464 Spadina Ave.

Books (Dental)—McAinsh Co., 4 College St.

Boots and Shoes—

Brotherton, John, 578 Yonge St.

Pink Shoe Store, 278 College St.

Dancing—

Metropolitan Dancing Academy.

Early, Prof. S. M., Yonge and Gerrard Sts.

Dental Supplies—

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Allen & Rollaston, Dental Laboratory, 2 College St.

Dental Co. of Candaa, 229 College St.

Dental Trading Co., 237 College St.

Goldsmith Bros., 24 Adelaide St. West.

Ingram & Bell, 256 McCaul St.

Ritter Dental Mfg. Co., Rochester, N.Y.

Temple, Pattison Co., Ltd., 243 College St.

White, S. S., Dental Mfg. Co., College St.

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Framing (Picture)—Geddes, J. W., 425 Spadina Ave.

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Beebe, F. H., 280 College St.

Walker, G. Hawley, Ltd., 126-8 Yonge St.

Operating Coats—Miller Mfg. Co., 44-46 York St.

Photographers—Farmer Bros., Ltd., 492 Spadina Ave.

Printers—

University of Toronto Press.

Haynes Press, 502 Yonge St.

Sporting Goods—

Brotherton, John, 578 Yonge St.

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